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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 25 2008 12 3 1 2008 1 1 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 04 17 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Hospital Association PAC D D " D 25 12 1.1 2008 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 1507360.96 January 1 (b) Cash on Hand at 1011075.92 Begining of Reporting Period 335503.42 1835937.67 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1346579.34 3343298.63 6(a) and 6(c) for Column B) 6905.28 2003624.57 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1339674.06 1339674.06 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on

Schedule C and/or Schedule D)

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

0.00

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

м м 1 1

From:

^D 2 5

2008

To:

м м 1 2 ^D 3 1

2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	194406.16	849903.40
	(ii) Unitemized	81917.39	395175.91
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	276323.55	1245079.31
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	5000.00	5975.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	281323.55	1251054.31
2.	Transfers From Affiliated/Other Party Committees	53450.00	551410.33
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	28000.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	729.87	5473.03
8.			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	335503.42	1835937.67
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	335503.42	1835937.67

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	405.28	104711.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	405.28	104711.97
2. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees4. Independent Expenditure	1500.00	1250400.00
(use Schedule E)	0.00	639947.52
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	1154.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1560.33
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	2715.08
9. Other Disbursements	5000.00	5850.00
O. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (c) Additional Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
 Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) 	6905.28	2003624.57
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	281323.55	1251054.31
34.	Total Contribution Refunds (from Line 28(d))	0.00	2715.08
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	281323.55	1248339.23
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	405.28	104711.97
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	405.28	104711.97

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Christopher M Dadlez		Date of Receipt
Mailing Address 114 Woodland Street		1 1 2 5 2 0 0 8
City Hartford	State Zip Code CT 06105-1208	Transaction ID: 16146117 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Saint Francis Care, Inc.	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Leslie Gianelli	I	Date of Receipt
Mailing Address 110 Barnes Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16146118
Wallingford FEC ID number of contributing federal political committee.	CT 06492-1802	Amount of Each Receipt this Period 350.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Director, Communications	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Ms. MaryEllen Kosturko, MHSM, BSN, Mailing Address 267 Grant Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16146121
Bridgeport FEC ID number of contributing	CT 06610-2805	Amount of Each Receipt this Period 250.00
federal political committee. Name of Employer Bridgeport Hospital	Occupation	
Receipt For:	Senior Vice President Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional) .	1	1600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 232 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Alison L Hong Mailing Address 25 Woodland Road City	d State Zip Code	Date of Receipt M
Bedford Hills FEC ID number of contributing federal political committee.	NY 10507-1713	Amount of Each Receipt this Period 250.00
Name of Employer Connecticut Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Director of Quality Patient Safety Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Gordon N. Litwin Mailing Address 63 Borden Place		Date of Receipt 1 1 2 8 2 0 0 8
City	State Zip Code	Transaction ID: 16146850
Little Silver	NJ 07739-1726	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Meridian Health	Occupation Vice Chairman	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr		Date of Receipt
Mailing Address 2378 Orchard Cres	st Blvd.	11 28 7 2008
City <u>Manasquan</u>	State Zip Code NJ 08736-4001	Transaction ID: 16146856 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation Receipt For:	Occupation Chief Information Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00]
SURTOTAL of Receipts This Page (option	al)	505.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Road City Langhorne FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code PA 19047-2306 C Occupation Vice President, Human Resources Aggregate Year-to-Date 235.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane City Livingston FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NJ 07039-2750 C Occupation Vice President Continuing Care Servi Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain City New Hope FEC ID number of contributing federal political committee.	State Zip Code PA 18938-5760 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ 339.61	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	15.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	itatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. ∠ 	Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Avenu		Zip Code	Date of Receipt 1 1 2 8 2 0 0 8
	City Pennington	State NJ	2ip Code 08534-2302	Transaction ID: 16146869
	FEC ID number of contributing federal political committee.	C	00004-2002	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation General Aggregate		
3.	Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr. Mailing Address 4 Poppy Lane	<u> </u>		Date of Receipt 1 1 2 8 2 0 0 8
	City	State	Zip Code	Transaction ID: 16146881
	<u>Howell</u>	NJ	07731-1451	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5.00
	Name of Employer New Jersey Hospital Assoc- iation		th Economics	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 235.00	
_	Full Name (Last, First, Middle Initial) Ms. Valerie Sellers			Date of Receipt
	Mailing Address 82 Millers Grove Road			1 1 2 8 2 0 0 8
	City	State	Zip Code	Transaction ID: 16146882
	Belle Mead	NJ	08502-4306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5.00
	Name of Employer New Jersey Hospital Assoc- iation		.P., Health Planning & Resea	arc
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 355.00	
	SUBTOTAL of Receipts This Page (optional)			15.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Matthew Anderson, JD Mailing Address 2550 University Aver City Saint Paul FEC ID number of contributing federal political committee. Name of Employer Minnesota Hospital Associ-	State Zip Code MN 55114-1052 C Occupation	Date of Receipt M M M / 26 / 2008 Transaction ID: 16146896 Amount of Each Receipt this Period 67.34
ation Receipt For: Primary General Other (specify) ▼	Vice Pres, Regulatory/Strategic Affair Aggregate Year-to-Date ▼ 345.33	
Full Name (Last, First, Middle Initial) Mr. David A Nelson Mailing Address 2400 St Francis Drive	Э	Date of Receipt 1 1 2 6 2 0 0 8
City	State Zip Code	Transaction ID: 16146924
Breckenridge FEC ID number of contributing federal political committee.	MN 56520-1025	Amount of Each Receipt this Period 250.00
Name of Employer St. Francis Healthcare Campus Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. Bruce J. Rueben		Date of Receipt
Mailing Address 306 East College Ave		111 26 2008
City <u>Tallahassee</u>	State Zip Code FL 32301-1522	Transaction ID: 16149252 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	88.93
Name of Employer Florida Hospital Associat- ion	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 503.52	
	1	

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	for each cat	te schedule(s) egory of the mmary Page	FOR LINE NUMBER: PAGE 11 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or fo	rinformation copied from such Reports and St or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or lame and address of any pol	used by any person itical committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
\.	Full Name (Last, First, Middle Initial) Mr. James F Hanko Mailing Address 1300 Anne St. NW City Bemidji FEC ID number of contributing	State Zip Code MN 56601-51	03	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
f []	Name of Employer North Country Regional Hospital Receipt For: Primary General Other (specify)	Occupation President and Chief E Aggregate Year-to-Date		187.50
3. <u>!</u> !	Full Name (Last, First, Middle Initial) Ms Kathy Johnson Mailing Address 200 North Elm Street City	State Zip Code		Date of Receipt M M
<u>.</u> I	Onamia FEC ID number of contributing lederal political committee.	MN 56359-79	01	Amount of Each Receipt this Period 250.00
3	Name of Employer Johnson Memorial Health Services Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date	250.00	
; <u> </u>	Full Name (Last, First, Middle Initial) Mr. Lawrence J Massa Mailing Address 2550 University Avenue	W.		Date of Receipt
	City Saint Paul	State Zip Code MN 55114-10	52	Transaction ID: 16150556 Amount of Each Receipt this Period
f _	FEC ID number of contributing federal political committee. Name of Employer Minnesota Hospital Associ-	C Occupation		150.00
<u> </u>	Minnesota Hospital Associ- ation Receipt For: Primary General Other (specify) ▼	President Aggregate Year-to-Date	600.00	
su	BTOTAL of Receipts This Page (optional)		>	587.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 232 (check only one) X
A C	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Dr. Peter E Person, , M.D. Mailing Address 502 East Second Stree			Date of Receipt 11 26 2008
	City Duluth	State MN	Zip Code	Transaction ID: 16150557
	FEC ID number of contributing federal political committee.	C	55805-1982	Amount of Each Receipt this Period 250.00
	Name of Employer St. Mary's/Duluth Clinic Health System Receipt For: ☐ Primary ☐ General Other (specify) ▼		t and Chief Executive Office Year-to-Date ▼ 250.00	r]
3.	Full Name (Last, First, Middle Initial) Ms. Cynthia Ann Moore-Hardy Mailing Address 10 East Washington			Date of Receipt 1 1 2 6 2 0 0 8
	City	State	Zip Code	Transaction ID: 16150581
	Painesville	OH	44077-3460	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Lake Hospital System	Occupation President	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
	Full Name (Last, First, Middle Initial) Ms. Cynthia K. Smith, JD			Date of Receipt
	Mailing Address 560 El Dorado			12 03 2008
	City	State	Zip Code	Transaction ID: 16154508
	Lawrence	KS	66047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Sisters of Charity of Lea- venworth Heal		/ Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			750.00

City Upper Arlington OH 43220-4247 FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 16154594 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154595 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154597 Toledo Transaction ID: 16154597 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154597 Amount of Each Receipt this Period Transaction ID: 16154597 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154597 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154597 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154597 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154597 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16154597 Toledo Date of Receipt Transaction ID: 16154597 Toledo Date of Receipt Transaction ID: 16154597 Transaction ID: 16154500 Transaction ID: 16154600 Amount of Each Receipt this Period	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Full Name (Last, First, Middle Initial) Mr. John E. Callender Mailing Address 2743 Elginfield Road City State Zip Code Upper Arlington OH 43220-4247 FEC ID number of contributing federal political committee. Name of Employer Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. William A. Sutton Mailing Address 4653 Ginger Trail City State Zip Code OH 43623-1041 FEC ID number of contributing federal political committee. City State Zip Code OH 43623-1041 FEC ID number of contributing federal political committee. City State Zip Code OH 43623-1041 FEC ID number of contributing federal political committee. Name of Employer Middle Initial) Mr. William A. Sutton Administrator Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Douglas W McNelli, FACHE Mailing Address 105 McKnight Dr. City State Zip Code OH 45044 FEC ID number of contributing federal political committee. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. Primary General City State Zip Code Transaction ID: 16154600 Amount of Each Receipt his Period FEC ID number of contributing federal political committee.	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mailing Address 4653 Ginger Trail City State Zip Code OH 43623-1041 FEC ID number of contributing federal political committee. Name of Employer Mercy Hospital of Defiance Primary General Other (specify) ▼ City State Zip Code OH 43623-1041 Amount of Each Receipt this Period Cocupation Administrator Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 16154597 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: 16154509 Amount of Each Receipt this Period Transaction ID: 16154600 Amount of Each Receipt Date of Receipt Transaction ID: 16154600 Amount of Each Receipt this Period City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. Name of Employer Middletown Regional Hospital Receipt For: Primary General Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Primary General	Full Name (Last, First, Middle Initial) Mr. John E. Callender Mailing Address 2743 Elginfield Road City Upper Arlington FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For:	OH 43220-4247 C Occupation Senior Vice President Aggregate Year-to-Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Mercy Hospital of Defiance Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Mr. Douglas W McNeill, FACHE Mailing Address 105 McKnight Dr. City State Zip Code Middletown FEC ID number of contributing federal political committee. Name of Employer Middletown Regional Hospital Receipt For: Primary General Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 250.00	Full Name (Last, First, Middle Initial) Mr. William A. Sutton Mailing Address 4653 Ginger Trail City Toledo FEC ID number of contributing	State Zip Code OH 43623-1041	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. Douglas W McNeill, FACHE Mailing Address 105 McKnight Dr. City State Zip Code Middletown OH 45044 FEC ID number of contributing federal political committee. Name of Employer Middletown Regional Hospital Receipt For: Primary General Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Receipt For: Primary General Other (specify)	Administrator Aggregate Year-to-Date ▼	
Name of Employer Middletown Regional Hospital Receipt For: Primary Occupation President and Chief Executive Officer Aggregate Year-to-Date 350.00	Mr. Douglas W McNeill, , FACHE Mailing Address 105 McKnight Dr. City Middletown FEC ID number of contributing	OH 45044	1 1 2 6 2 0 0 8 Transaction ID: 16154600
	Name of Employer Middletown Regional Hospi- tal Receipt For: Primary General	Occupation President and Chief Executive Officer Aggregate Year-to-Date	
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		550.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	I Statements may not be sold or used by any pers he name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William Linesch Mailing Address 4508 Royal Ridge W	/ay	Date of Receipt 1 2 0 1 2 0 0 8
City	State Zip Code	Transaction ID: 16154625
Kettering FEC ID number of contributing federal political committee.	OH 45429-1300	Amount of Each Receipt this Period 500.00
Name of Employer Miami Valley Hospital Receipt For: Primary General Other (specify) ▼	Occupation VP Human Resources Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Thomas E Cecconi Mailing Address 1320 Mercy Drive N	W	Date of Receipt 1 2 0 1 2 0 0 8
City	State Zip Code	Transaction ID: 16154627
Canton	OH 44708-2614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Medical Center	Occupation President and Chief Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William H Considine		Date of Receipt
Mailing Address One Perkins Square		1 2 0 1 2 0 0 8
City	State Zip Code	Transaction ID: 16154953
Akron	OH 44308-1062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Akron Children's Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	<u>'</u>	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	not be sold or used by any persong dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Dawn Ahner Mailing Address 77 Pringle Way	0.11	7.0.4	Date of Receipt 1 2 0 2 2 0 0 8
City Reno FEC ID number of contributing federal political committee.	State NV	Zip Code 89502-1474	Transaction ID: 16155115 Amount of Each Receipt this Period 500.00
Name of Employer Renown Health Receipt For: Primary General Other (specify) ▼		n pancial Officer e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Talana Bell Mailing Address P O Box 6907	1		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Dothan	State AL	Zip Code	Transaction ID: 16155136
FEC ID number of contributing federal political committee.	C	36302-6907	Amount of Each Receipt this Period 500.00
Name of Employer Flowers Hospital	Occupatio Chief Fin	n ancial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. Carl W Bailey			Date of Receipt
Mailing Address P O Box 818			12 04 2008
City Florence	State AL	Zip Code 35631-0818	Transaction ID: 16155137 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Eliza Coffee Memorial Hos- pital	Occupatio Administ	rator	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	<u> </u>		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jason P. Alexander		Date of Receipt
Mailing Address 7220 Wynnridge Drive City	State Zip Code	1 2 0 0 8 Transaction ID: 16155138
Mobile	AL 36695-5500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Providence Hospital	Occupation Executive Vice President & COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Mark R Stoddard		Date of Receipt
Mailing Address 48 West 1500 North		12 03 2008
City	State Zip Code	Transaction ID: 16155756
<u>Nephi</u>	UT 84648-8900	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Rural Health Management Corporation	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Rexford W. Titus, III		Date of Receipt
Mailing Address 345 Woodland Lane		12 04 2008
City	State Zip Code	Transaction ID: 16155927
Oconomowoc	WI 53066-2734	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer ProHealth Care	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1300.00
TOTAL This Period (last page this line number of	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. James G Chastain, , CHE		Date of Receipt
Mailing Address P O Box 157-A City	State Zip Code	1 2 0 0 8 2 0 0 8 Transaction ID: 16155969
Whitfield	MS 39193-0157	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	85.00
Name of Employer Mississippi State Hospital	Occupation Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Mr. Charles L Denton		Date of Receipt
Mailing Address 960 Avent Drive		12 02 7 2008
City	State Zip Code	Transaction ID: 16155977
<u>Grenada</u>	MS 38901-5230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	310.00
Name of Employer Grenada Lake Medical Cent- er	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 610.00	
Full Name (Last, First, Middle Initial) Mr. WIII Ferniany		Date of Receipt
Mailing Address 2500 North State Str	eet	12 02 YYYYY 12 02 2008
City	State Zip Code	Transaction ID: 16155981
Jackson FEC ID number of contributing	MS	Amount of Each Receipt this Period 500.00
federal political committee.	[C]	300.00
Name of Employer University Hospitals and Clinics, Univ	Occupation Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		895.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Eddie L. Foster		Date of Receipt
Mailing Address 116 Woodgreen Cros	State Zip Code	1 2 0 0 8 2 0 0 8 Transaction ID: 16155983
Madison	MS 39110-4522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mississippi Hospital Asso- ciation	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.50	
Full Name (Last, First, Middle Initial) Mr. Lawrence Graeber		Date of Receipt
Mailing Address 124 E. Waterwood D		12 / 02 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16155989
Brandon	MS 39047-6527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer University Hospitals and Clinics, Univ	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. G. Douglas Higginbotham		Date of Receipt
Mailing Address P O Box 607		12 02 2008
City	State Zip Code	Transaction ID: 16155995
Laurel	MS 39441-0607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer South Central Regional Me- dical Center	Occupation Executive Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	285.00	
SUBTOTAL of Receipts This Page (optional)		335.00
TOTAL This Period (last page this line numb	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Fred B Hood, , FACHE		Date of Receipt
Mailing Address P O Box 790		12 02 2008
City Pontotoc	State Zip Code MS 38863-0790	Transaction ID: 16155996 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer North Mississippi Medical Center-Ponto	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. L. Ray Humphreys	-	Date of Receipt
Mailing Address 1400 East Union Str	eet	1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16155998
Greenville	MS 38703-3246	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Delta Regional Medical Ce- nter	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Kurt W Metzner		Date of Receipt
Mailing Address 1225 North State Str	eet	12 02 YYYY 12 02 2008
City	State Zip Code	Transaction ID: 16156018
<u>Jackson</u>	MS 39202-2064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	875.00
Name of Employer Mississippi Baptist Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General	Aggregate Year-to-Date ▼	, [
Other (specify)	875.00	
SUBTOTAL of Receipts This Page (optional)		1375.00
TOTAL This Period (last page this line numb	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 232 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Ken Posey, , FACHE Mailing Address P O Box 527		Date of Receipt 1 2 0 2 2 0 0 8
City <u>Bay Springs</u>	State Zip Code MS 39422-0527	Transaction ID: 16156028 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jasper General Hospital	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. W. Kent Rogers Mailing Address 835 Medical Cente	r Drive	Date of Receipt 1 2 0 2 2 0 0 8
City	State Zip Code	Transaction ID: 16156034
West Point	MS 39773-9320	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	315.00
Name of Employer North Mississippi Medical Center-West	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 615.00	
Full Name (Last, First, Middle Initial) Mr. W. Dale Saulters		Date of Receipt
Mailing Address P O Box 967		12 02 7 9 9 9
City Louisville	State Zip Code MS 39339-0967	Transaction ID: 16156035 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer Winston Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	740.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 232 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to s	13 14 15 16 16 16 17 17 16 17 17 16 17 17 16 17
NAME OF COMMITTEE (In Full) American Hospital Association PAC	io nano and address of any political committee to v	SOLON SOLVENIEN SOLON SOLUTIONS
Full Name (Last, First, Middle Initial) Dr. Melinda Estes, , M.D.		Date of Receipt
Mailing Address 111 Colchester Avenu		12 DD 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16157614
Burlington	VT 05401-1473	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Fletcher Allen Health Care	Occupation President and Chief Executive Officer]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Calvin D Johnson	.1	Date of Receipt
Mailing Address P O Box 188		12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16157633
Kilmichael	MS 39747-0188	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer Kilmichael Hospital	Occupation Administrator]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) Mr. Stephen M Erixon		Date of Receipt
Mailing Address 220 Windy Ridge		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16159420
<u>Hollister</u>	MO 65672-5725	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Skaggs Community Health Center	Occupation Chief Executive Officer]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	462.00	
		767.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Peter L Gosline Mailing Address 452 Old Street Road City State Zip Code Peterborough NH 03459-1295 Full Name of Employer Occupation Chief Executive Officer Receipt For: Primary General Other (specify) ▼ Other (specify) ▼ Other (specify) ▼ State Zip Code Hopkinton NH 03229-3402 FEC ID number of contributing federal political committee. City State Zip Code Hopkinton NH 03229-3402 FEC ID number of contributing federal political committee. City State Zip Code NH 03229-3402 FEC ID number of contributing federal political committee. City State Zip Code NH 03229-3402 FEC ID number of contributing federal political committee. City State Zip Code Other (specify) ▼ Date of Receipt Amount of Each Receipt this Period Date of Receipt Transaction ID: 16161931 Amount of Each Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 16161932 Amount of Each Receipt this Period Date of Receipt Transaction ID: 16161932 Amount of Each Receipt this Period	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Peter L Gosline Mailing Address 452 Old Street Road City Peterborough Peterborough NH 03459-1295 FEC ID number of contribuling federal political committee. City Pinnary General Other (specify) ▼ State Zip Code NH 03459-1295 City Pinnary General Other (specify) ▼ State Zip Code NH 0329-3402 Full Name (Last, First, Middle Initial) Ms. Paula Minnehan Mailing Address 283 Gallopiny Hill Road City Hopkinton FEC ID number of contributing federal political committee. C Name of Employer New Hampshire Hospital Association Receipt For: Pirmary General Other (specify) ▼ State Zip Code NH 0329-3402 FEC ID number of contributing federal political committee. C Primary General Other (specify) ▼ State Zip Code NH 0329-3402 Full Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butter Street City State Zip Code NH 03079-3925 Full Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butter Street City State Zip Code NH 03079-3925 Full Name (Last, First, Middle Initial) Mr. John F Prochilo City State Zip Code NH 03079-3925 Full Name (Last, First, Middle Initial) Mr. John F Prochilo City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City State Zip Code NH 03079-3925 Amount of Each Receipt this Period City Pirmary General		tatements may not be sold or used by any person name and address of any political committee to so	
Mailing Address 452 Old Street Road City State Zip Code NH 03458-1295 FEC ID number of contributing federal political committee. Name of Employer Mailing Address 283 Gallopiny Hill Road City State Zip Code NH 03458-1295 Name of Employer Moriadnock Community Hospital Agreement State Zip Code NH 03229-3402 Full Name (Last, First, Middle Initial) Mailing Address 283 Gallopiny Hill Road City State Zip Code NH 03229-3402 City State Zip Code NH 03229-3402 Fel D number of contributing federal political committee. C Occupation NH 03229-3402 City State Zip Code NH 1059-114 Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ C Occupation NH 03229-3402 Full Name (Last, First, Middle Initial) Mailing Address 70 Butler Street C Occupation V.P., Finance and Rural Hospitals Receipt For: Quiter (specify) ▼ State Zip Code NH 1059-114 Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ C Occupation NH 03079-3925 City State Zip Code Transaction ID: 16161932 Amount of Each Receipt Mailing Address 70 Butler Street C Occupation NH 03079-3925 City State Zip Code Transaction ID: 16161932 Amount of Each Receipt Mailing Address 70 Butler Street C Occupation NH 03079-3925 Amount of Each Receipt Mailing Address 70 Butler Street C Occupation V.P., Finance and Rural Hospitals Receipt Mailing Address 70 Butler Street City State Zip Code Transaction ID: 16161932 Amount of Each Receipt his Period State S	` '		
City State Zip Code NH 0345s-1295 Peterborough NH 0345s-1295 Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Name of Employer New Hampshire Hospital Sociation NH 03079-3925 Full Name (Last, First, Middle Initial) Nm. John F Prochilo Name of Employer New Hampshire Hospital Association NH 03079-3925 Full Name (Last, First, Middle Initial) Nm. John F Prochilo Receipt For: Primary General Other (specify) ▼ State Zip Code NH 0329-3402 Full Name (Last, First, Middle Initial) Nm. John F Prochilo Mailing Address 70 Butler Street C Name of Employer New Hampshire Hospital Association NH 03079-3925 Full Name (Last, First, Middle Initial) Nm. John F Prochilo Mailing Address 70 Butler Street C Name of Employer New Hampshire Hospital Association NH 03079-3925 FEC ID number of contributing federal political committee. C Name of Employer New Hampshire Hospital Association NH 03079-3925 FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Chief Executive Officer and Administra Aggregate Year-to-Date ▼ Name of Employer Northeast Rehabilitation Chief Executive Officer and Administra Aggregate Year-to-Date ▼	Mr. Peter L Gosline		Date of Receipt
Peterborough PEC ID number of contributing federal political committee. C	Mailing Address 452 Old Street Road		
FEC ID number of contributing federal political committee. Name of Employer	City	State Zip Code	Transaction ID: 16161930
Name of Employer Cocupation Chief Executive Officer Aggregate Year-to-Date ▼	Peterborough	NH 03458-1295	Amount of Each Receipt this Period
Receipt For:		C	350.00
Receipt For:	Name of Employer Monadnock Community Hospi-	'	
Primary General Other (specify) ▼ 350.00 Full Name (Last, First, Middle Initial) Ms. Paula Minnehan Mailing Address 283 Gallopiny Hill Road City State Zip Code NH 03229-3402 FEC ID number of contributing federal political committee. C C 350.00 Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ 350.00 Full Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butler Street C State Zip Code NH 03079-3925 Full Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butler Street C State Zip Code NH 03079-3925 City State Zip Code NH 03079-3925 FeC ID number of contributing federal political committee. C State Zip Code NH 03079-3925 Full Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butler Street C State Zip Code NH 03079-3925 FeC ID number of contributing federal political committee. C State Zip Code NH 03079-3925 Field Name of Employer Northeast Rehabilitation Chief Executive Officer and Administra Aggregate Year-to-Date ▼ Primary General	tal		-
Ms. Paula Minnehan Mailing Address 283 Gallopiny Hill Road City State Zip Code NH 03229-3402 FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ City State Zip Code NH 03229-3402 Coccupation V.P., Finance and Rural Hospitals Aggregate Year-to-Date ▼ 1 2 0 8 7 2 0 0 8 Transaction ID: 16161931 Amount of Each Receipt this Period Salon Date of Receipt Date of Receipt M M M C D D S D D D D D D D D D D D D D D D D	Primary General		
City State Zip Code Transaction ID: 16161931 Amount of Each Receipt this Period			Date of Receipt
State Zip Code NH 03229-3402		d	M M / D D / Y Y Y Y
Hopkinton NH 03229-3402 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butler Street City State Zip Code NH 03079-3925 City State Zip Code NH 03079-3925 FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Hospital Receipt For: Primary General Occupation Chief Executive Officer and Administra Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 1 250.00	City	State Zip Code	
Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ City Salem FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Hospital Receipt For: City State State City State State City State C		·	
Sociation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Pull Name (Last, First, Middle Initial) Mr. John F Prochilo Mailing Address 70 Butler Street Date of Receipt Mailing Address 70 Butler Street City State Zip Code NH 03079-3925 FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Hospital Receipt For: Primary General Occupation Chief Executive Officer and Administra Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼		C	350.00
Receipt For: Primary	Name of Employer New Hampshire Hospital As- sociation	· '	
Mr. John F Prochilo Mailing Address 70 Butler Street City State Zip Code Salem NH 03079-3925 FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Hospital Receipt For: Primary General Date of Receipt M M M D D D D D D D D D D D D D D D D	Receipt For: Primary General		
City State Zip Code Transaction ID: 16161932 Salem NH 03079-3925 FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Hospital Receipt For: Primary General State Zip Code Transaction ID: 16161932 Amount of Each Receipt this Period 350.00			Date of Receipt
City State Zip Code Transaction ID: 16161932 Salem NH 03079-3925 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 350.00 Name of Employer Northeast Rehabilitation Hospital Receipt For: Occupation Chief Executive Officer and Administra Aggregate Year-to-Date ▼ Primary General Aggregate Year-to-Date ▼	Mailing Address 70 Butler Street		
FEC ID number of contributing federal political committee. Name of Employer Northeast Rehabilitation Hospital Receipt For: Primary General C 350.00	City	State Zip Code	
Name of Employer Northeast Rehabilitation Hospital Receipt For: Primary General Occupation Chief Executive Officer and Administra Aggregate Year-to-Date 350.00	Salem	NH 03079-3925	Amount of Each Receipt this Period
Northeast Réhabilitation Hospital Receipt For: Primary General Chief Executive Officer and Administra Aggregate Year-to-Date ▼		C	350.00
Primary General 350 00	Northeast Rehabilitation	_ I	
250.00	Receipt For:	Aggregate Year-to-Date ▼	
		350.00	

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 232 (check only one) X
Any information cop or for commercial p	oied from such Reports and Staurposes, other than using the i	atements may	not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	IMITTEE (In Full) spital Association PAC			
Mr. Reginald J. L				Date of Receipt
	Swiftwater Road			12 08 2008
City Woodsville		State NH	Zip Code 03785-2001	Transaction ID: 16161933 Amount of Each Receipt this Period
FEC ID number federal political of		C	03703-2001	250.00
Name of Employ Cottage Hospita	ver I	Occupation Administr		7
Receipt For: Primary Other (spe	General ecify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last Mr. Paul Rutledge	, First, Middle Initial) e, FACHE			Date of Receipt
Mailing Address	110 Winners Circle First Floor			12 08 7 9 9
City		State	Zip Code	Transaction ID: 16161937
Brentwood FEC ID number federal political of		C	37027-5070	Amount of Each Receipt this Period
Name of Employ HCA	ver	Occupation President		
Receipt For: Primary Other (spe	General ecify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name (Last Mr. Allen Golson	, First, Middle Initial)			Date of Receipt
Mailing Address	350 Hospital Drive			12 08 2008
City		State	Zip Code	Transaction ID: 16162333
Macon FEC ID number federal political of		GA C	31217-3838	Amount of Each Receipt this Period 250.00
Name of Employ Coliseum Medic	ver al Centers	Occupation Chief Exe	n ecutive Officer	7
Receipt For: Primary Other (spe	General ecify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Re	ceipts This Page (optional)			1500.00
	nd (last page this line number o		<u> </u>	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
A or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Robert M Trimm		Date of Receipt
	Mailing Address P O Box 139		12 08 2008
	City Waycross	State Zip Code GA 31502-0139	Transaction ID: 16162341 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Satilla Regional Medical Center	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Jay M. Baumgartner		Date of Receipt
	Mailing Address 111 Woodlawn Dr.		1 2 0 8 2 0 0 8
	City	State Zip Code	Transaction ID: 16162370
	Warsaw	IN 46580-4750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Otis R. Bowen Center for Human Service	Occupation Chief Financial Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) Ms. Cara Breidster		Date of Receipt
	Mailing Address I-65 at 21st Street		12 08 2008
	City	State Zip Code	Transaction ID: 16162377
	Indianapolis FEC ID number of contributing federal political committee.	IN 46202	Amount of Each Receipt this Period 500.00
	Name of Employer Clarian Health Partners	Occupation Hospital Director, Tax	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Г	SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 25 / 232 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	ne name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Thomas Crawford Mailing Address 700 Forest Drive		Date of Receipt 1 2 0 8 2 0 0 8
City	State Zip Code	Transaction ID: 16162388
Frankfort	IN 46041-2636	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Frankfort Hos- pital Receipt For:	Occupation Chief Executive Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Blake A Dye		Date of Receipt
Mailing Address 2805 W. County Roa		12 08 2008
City	State Zip Code	Transaction ID: 16162394
New Castle	IN 47362-9719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Henry County Hospital	Occupation Hospital CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. R. Mark Ellison		Date of Receipt
Mailing Address 3040 Reflection Ct.		12 08 2008
City Greenwood	State Zip Code IN 46143-6618	Transaction ID: 16162397 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Indianapolis Hospital	Occupation Controller	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Richard Graffis, , M.D. Mailing Address P O Box 1367			Date of Receipt 1 2 0 8 2 0 0 8
City Indianapolis FEC ID number of contributing federal political committee.	State IN	Zip Code 46206-1367	Transaction ID: 16162403 Amount of Each Receipt this Period 500.00
Name of Employer Clarian Health Partners Receipt For: Primary General Other (specify)		e Vice President e Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. Steven S. Ivy, Ph.D. Mailing Address 1701 North Senate E	Boulevard		Date of Receipt 1 2 0 8 2 0 0 8
City	State	Zip Code	Transaction ID: 16162414
Indianapolis FEC ID number of contributing federal political committee.	C	46202-1239	Amount of Each Receipt this Period 500.00
Name of Employer Clarian Health Partners	Occupatio Hospital		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. Jeffrey Linder			Date of Receipt
Mailing Address P.O. Box 1367			12 08 2008
City	State	Zip Code	Transaction ID: 16162429
Indianapolis FEC ID number of contributing federal political committee.	C	46206-1367	Amount of Each Receipt this Period 500.00
Name of Employer Clarian Health Partners	Occupatio Hospital	n VP, Gov't Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	1		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	f	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 232 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may no name and addres	t be sold or used by any persons of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Dr. Jon D. Rahman, M.D.			Date of Receipt
Mailing Address 418 Burlington Lane			12 08 2008
City	State	Zip Code	Transaction ID: 16162449
Carmel	IN	46032-9162	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer St. Vincent Health	Occupation Chief Medica	al Officer	
Receipt For:	Aggregate Ye		
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Linda Roberts			Date of Receipt
Mailing Address 1701 North Senate Bou	ulevard		12 08 2008
City	State	Zip Code	Transaction ID: 16162456
<u>Indianapolis</u>	IN	46202-1239	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Clarian Health	Occupation Hospital Vic	e President	
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Bernadine Marcuccilli Wallace			Date of Receipt
Mailing Address 1003 Overlook Road			12 08 2008
City	State	Zip Code	Transaction ID: 16162478
Marion	IN	46952-1330	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Marion General Hospital	Occupation Vice Preside	ent	
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Martin Bonick Mailing Address 6019 Waterfall Way		Date of Receipt 1 2 0 9 2 0 0 8
	City	State Zip Code	Transaction ID: 16162588
	Prospect	KY 40059-7505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Jewish Hospital	Occupation President/CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
	Full Name (Last, First, Middle Initial) Mr. Donald R Fields Mailing Address 100 Medical Center Dri	WO.	Date of Receipt
	Maining Address 100 Medical Center Dri	ve	12 09 2008
	City	State Zip Code	Transaction ID: 16162598
	<u>Hazard</u>	KY 41701-9421	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Hazard ARH Regional Medic- al Center	Occupation Senior Community Chief Executive	Offic
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. Michael T. Rust		Date of Receipt
	Mailing Address 937 Woodland Heights	Drive	12 09 7 2008
	City	State Zip Code	Transaction ID: 16162599
	Louisville	KY 40245-5219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Kentucky Hospital Associa- tion	Occupation President and Chief Executive Offic	er
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
\[SUBTOTAL of Receipts This Page (optional)		1600.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Dennis B Johnson Mailing Address 1025 New Moody La	ane	Date of Receipt
City <u>La Grange</u> FEC ID number of contributing	State Zip Code KY 40031-9154	Transaction ID: 16162600 Amount of Each Receipt this Period 250.00
Name of Employer Baptist Hospital Northeast Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. David L Gray Mailing Address 913 North Dixie Ave	enue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16162601
Elizabethtown FEC ID number of contributing federal political committee.	KY 42701-2599	Amount of Each Receipt this Period 500.00
Name of Employer Hardin Memorial Hospital	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Charles Black		Date of Receipt
Mailing Address P O Box 1310		1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16162603
Mount Vernon FEC ID number of contributing federal political committee.	KY 40456-1310	Amount of Each Receipt this Period 500.00
Name of Employer Rockcastle Hospital and Respiratory Ca Receipt For:	Occupation Chief Financial Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	1	1250.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 232 (check only one) X
Any information copied from soor for commercial purposes, or NAME OF COMMITTEE (American Hospital Ass	ther than using the name and In Full)	may not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mid- Mr. Milton Brooks Mailing Address 850 Riv	dle Initial) verview Avenue		Date of Receipt 1 2 0 9 2 0 0 8
City Pineville	State KY	Zip Code 40977-1430	Transaction ID: 16162604 Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.		10077 1400	500.00
Name of Employer Pineville Community Hospi tal Associati Receipt For: Primary Ge Other (specify) ▼		etion Executive Officer late Year-to-Date 500.00	
Full Name (Last, First, Mid- Mr. Stephen A Estes Mailing Address P O Bo			Date of Receipt 1 2 0 9 2 0 0 8
City	State	Zip Code	Transaction ID: 16162605
Mount Vernon FEC ID number of contribu federal political committee.	ting KY	40456-1310	Amount of Each Receipt this Period 500.00
Name of Employer Rockcastle Hospital and Respiratory Ca Receipt For:	, , , , , , , ,	ation Executive Officer pate Year-to-Date	
	neral	500.00	
Full Name (Last, First, Mid- Jeff Smithern	dle Initial)		Date of Receipt
Mailing Address 145 Ne	ewcomb Avenue		12 09 2008
City	State	Zip Code	Transaction ID: 16162607
Mount Vernon FEC ID number of contributed federal political committee.	ting KY	40456-2728	Amount of Each Receipt this Period 250.00
Name of Employer Rockcastle Hospital and Respiratory Ca		or of Respiratory Care	
Receipt For: Primary Ge Other (specify) ▼	Aggreg neral	ate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This	Page (optional)		1250.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ie name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. John Burgett		Date of Receipt
	Mailing Address 1 Trillium Way City	State Zip Code	12 09 2008
	London	KY 40701-8420	Transaction ID: 16162609 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Baptist Regional Medical Center	Occupation Chief Financial Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Б.	Full Name (Last, First, Middle Initial) Mr. Frank A. Butler	. L	Date of Receipt
	Mailing Address 437 Adair Road		12 09 2008
	City	State Zip Code	Transaction ID: 16162610
	Lexington	KY 40536-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer University of Kentucky Ho- spital	Occupation Vice President/Medical Center Operation	9
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
с. С.	Full Name (Last, First, Middle Initial) Mr Joseph G Koch		Date of Receipt
	Mailing Address 531 Woodlawn Avenu		12 09 2008
	City	State Zip Code WV 25801-6008	Transaction ID: 16162611
	Beckley FEC ID number of contributing federal political committee.	WV 25801-6008	Amount of Each Receipt this Period 250.00
	Name of Employer Bourbon Community Hospital	Occupation CEO	
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		1000.00
f	TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	Ly not be sold or used by any person dress of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		a coc or ary pointed committee to	
Full Name (Last, First, Middle Initial) Mr. James Ramsey			Date of Receipt
Mailing Address 530 South Jackson S	Street		1 2 0 9 2 0 0 8
City	State	Zip Code	Transaction ID: 16162613
Louisville	KY	40202-1675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer University of Louisville	Occupation Trustee	n	
Hospital * Receipt For:	_, .	e Year-to-Date ▼	\dashv
Primary General Other (specify) ▼	Aggregate	500.00]
Full Name (Last, First, Middle Initial) Mrs. Susan Stout Tamme, , FACHE			Date of Receipt
Mailing Address 4000 Kresge Way			12 09 2008
City	State	Zip Code	Transaction ID: 16162614
Louisville	KY	40207-4605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Baptist Hospital East	Occupation President		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen L Meredith			Date of Receipt
Mailing Address 910 Wallace Avenue			12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16162616
<u>Leitchfield</u>	KY	42754-2414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Twin Lakes Regional Medic- al Center	Occupation Chief Exe	n ecutive Officer	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
			1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 232 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Carl G Herde Mailing Address 4007 Kresge Way			Date of Receipt
City Louisville FEC ID number of contributing	State KY	Zip Code 40207-4677	Transaction ID: 16162617 Amount of Each Receipt this Period 250.00
Receipt For: Primary Other (specify) ▼	Occupatio Vice Pre	n sident and Chief Financial Of e Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr. E. Berton Whitaker Mailing Address 900 Clinic Drive			Date of Receipt 1 2 0 9 2 0 0 8
City Madisonville FEC ID number of contributing federal political committee.	State KY	Zip Code 42431-1653	Transaction ID: 16162623 Amount of Each Receipt this Period 500.00
Name of Employer Regional Medical Center of Hopkins Cou Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President Aggregate		
Full Name (Last, First, Middle Initial) Mr. Jack G. Blackwell Mailing Address 2201 Forest Ave	I		Date of Receipt
City Ashland FEC ID number of contributing federal political committee.	State KY	Zip Code 41101	Transaction ID: 16162628 Amount of Each Receipt this Period 312.00
Name of Employer Highlands Regional Medical Center Receipt For: Primary General Other (specify) ▼		n nancial Officer e Year-to-Date 312.00	
SUBTOTAL of Receipts This Page (options	al)		1062.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 232 (check only one) X
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Edward Nairn		Date of Receipt
Mailing Address Highlands Reg Box 668		12 09 2008
City Prestonburg	State Zip Code KY 41653-0668	Transaction ID: 16162633 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Highlands Regional Medical Center	Occupation Board Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Harold C Warman, , Jr., FAC Mailing Address P O Box 668	1	Date of Receipt 1 2 0 9 2 0 0 8
City	State Zip Code	Transaction ID: 16162635
Prestonsburg	KY 41653-0668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Highlands Regional Medical Center	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Chris Carle		Date of Receipt
Mailing Address 238 Barnes Ro	ad	12 09 2008
City	State Zip Code	Transaction ID: 16162638
Williamstown FEC ID number of contributing federal political committee.	KY 41097-9460	Amount of Each Receipt this Period 250.00
Name of Employer St. Elizabeth Medical Cen- ter-Grant Cou	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (o	otional)	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 232 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	I Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Carolyn J. Belk		Date of Receipt
Mailing Address 8060 El Rio St		12 09 2008
City	State Zip Code	Transaction ID: 16162644
<u>Houston</u>	TX 77054-4186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Methodist Hospital, The	Occupation VP Government Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Donald J Wee		Date of Receipt
Mailing Address 363 SE Third Street		M M / D D / Y Y Y Y Y Y 1 2 0 9 2 0 0 8
City	State Zip Code	Transaction ID: 16162651
Prineville	OR 97754-1206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Pioneer Memorial Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Dennis E Burke		Date of Receipt
Mailing Address 370 W Gettman Roa	nd	12 09 2008
City	State Zip Code	Transaction ID: 16162653
<u>Hermiston</u>	OR 97838-8456	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Good Shepherd Healthcare System	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
	<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	A)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	not be sold or used by any person	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	and the second s	
Full Name (Last, First, Middle Initial) Ms. Pamela S Vukovich			Date of Receipt
Mailing Address 1919 NW Lovejoy	Street		12 09 2008
City Portland	State OR	Zip Code 97209-1503	Transaction ID: 16162654 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07200	250.00
Name of Employer Legacy Health System	Occupation Senior Vi	n ce President and Chief Fina	nd
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Wayne Clark			Date of Receipt
Mailing Address 7555 SW Afton La	ne		12 09 YYYYY
City Tigard	State OR	Zip Code 97224-7680	Transaction ID: 16162665 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37224 7000	250.00
Name of Employer Legacy Health System	Occupation VP Comr	n n Relations & Marketing	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) George Brown, MD	I		Date of Receipt
Mailing Address 376 NW 81 PI			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State OR	Zip Code	Transaction ID: 16162666
Portland FEC ID number of contributing federal political committee.	C	97229-6777	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupation President		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(crieck drily drie)
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political commi	person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard Gibson		Date of Receipt
Mailing Address 1000 NE Greenleaf Ro	ad State Zip Code	12 09 2008
Portland	OR 97229	Transaction ID: 16162668 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Legacy Health System	Occupation Senior VP & Chief Information C	Officer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.0	
Full Name (Last, First, Middle Initial) Dr. George Cioffi, MD.		Date of Receipt
Mailing Address 3639 NW Thurman		12 09 2008
City	State Zip Code	Transaction ID: 16162669
Portland	OR 97210-1232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Legacy Health System	Occupation Chief of Opthalmology	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.0	0 "
Full Name (Last, First, Middle Initial) Mr. Russ Danielson		Date of Receipt
Mailing Address 1926 Aztec Court		12 09 7 9 2008
City West Line	State Zip Code OR 97068-4804	Transaction ID: 16162670
West Linn FEC ID number of contributing federal political committee.	OR 97068-4804	Amount of Each Receipt this Period 500.00
Name of Employer Providence St. Vincent Me- dical Center	Occupation Sr. Vice President/CEO-Oregon	Region
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.0	0 ,
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1250.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Mark D. Scott			Date of Receipt
Mailing Address 8275 Junco Ct			12 09 2008
City	State OR	Zip Code	Transaction ID: 16162671
Redmond FEC ID number of contributing federal political committee.	C	97756-8352	Amount of Each Receipt this Period 250.00
Name of Employer Silverton Hospital	Occupatio Chief Ex	n perience Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William E Winter			Date of Receipt
Mailing Address 342 Fairview Street			12 09 2008
City Silverton	State OR	Zip Code 97381-1917	Transaction ID: 16162672 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	070011017	500.00
Name of Employer Silverton Hospital	Occupatio Administ	n rative Director	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 715.00	
Full Name (Last, First, Middle Initial) Mr. Andrew S. Davidson			Date of Receipt
Mailing Address 2123 Ridgebrook Dr	rive		12 09 2008
City West Linn	State OR	Zip Code 97068-1943	Transaction ID: 16162673 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37000-1343	1195.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupatio Presiden	t & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1695.00	
SUBTOTAL of Receipts This Page (optional			1945.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 232 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	I Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	and doc	The state of the s	
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Andy Van Pelt			Date of Receipt
Mailing Address 4000 Kruse Way Pla Building 2, Suite 100			12 09 2008
City	State	Zip Code	Transaction ID: 16162674
Lake Oswego	OR	97035-5545	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		210.00
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Director of	n of Communications	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	210.00]
Full Name (Last, First, Middle Initial) Mr. Terry O Finklein			Date of Receipt
Mailing Address 2111 Exchange Stree	et		12 09 7 7 9 8
City	State	Zip Code	Transaction ID: 16162675
<u>Astoria</u>	OR	97103-3329	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Columbia Memorial Hospital	Occupation Chief Exe	n ecutive Officer	7
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Mr. Mel Pyne			Date of Receipt
Mailing Address 3015 Summit Sky Bl	vd.		1 2 0 9 2 0 0 8
City	State	Zip Code	Transaction ID: 16162676
Eugene	OR	97405-6253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer PeaceHealth	Occupation CEO	ו	7
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		500.00	1
Other (specify)		300.00	
			960.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(cricck drily drie)
4	or for commercial purposes, other than using the	atements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Peter F Rapp		Date of Receipt
	Mailing Address 2828 NW Cumberland	Road	12 09 2008
	City	State Zip Code	Transaction ID: 16162677
	Portland FEC ID number of contributing federal political committee.	OR 97201-3098	Amount of Each Receipt this Period 500.00
	Name of Employer OHSU Hospital	Occupation Vice President and Executive Directors	and a
	Receipt For:	Vice President and Executive Dir Aggregate Year-to-Date ▼	ector
	Primary General Other (specify) ▼	500.00	
– В.	Full Name (Last, First, Middle Initial) Michael Murphy		Date of Receipt
	Mailing Address 3394 Creek View		12 09 2008
	City	State Zip Code	Transaction ID: 16162679
	Medford	OR 97504-9624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Asante Health System	Occupation Vice President of Medical Affairs	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. James Bowden		Date of Receipt
	Mailing Address PO Box 238		12 10 2008
	City	State Zip Code TN 37662-0238	Transaction ID: 16164063
	Kingsport FEC ID number of contributing federal political committee.	TN 37662-0238	Amount of Each Receipt this Period 300.00
	Name of Employer Wellmont Holston Valley Medical Center	Occupation Chief Medical Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)		1050.00
\vdash	TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 232 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any persor he name and address of any political committee to s	13 14 15 16 16 16 17 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 16 17 17 16 17 17 16 17
NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Ms. Martha O'Regan Chill		Date of Receipt
Mailing Address 10820 Parkside Drive		12 10 2008
City Knoxville	State Zip Code TN 37934-1956	Transaction ID: 16164064
FEC ID number of contributing federal political committee.	TN 37934-1956	Amount of Each Receipt this Period 300.00
Name of Employer Wellmont Holston Valley Medical Center	Occupation Vice President-Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Linda Crawford		Date of Receipt
Mailing Address 142 West 5th Street		12 10 2008
City	State Zip Code	Transaction ID: 16164065
Cookeville	TN 38501-1760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Cookeville Regional Medic- al Center	Occupation Assistant Administrator, Nursing Servi	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Gregory M. Duckett		Date of Receipt
Mailing Address 350 North Humphrey	s Boulevard	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Memphis	State Zip Code TN 38120-2177	Transaction ID: 16164066 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Baptist Memorial Health Care Corporati	Occupation Senior Vice President/ Corporate Cour	าร
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
		1550.00

SCHEDULE A (FEC I	-	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 232 (check only one) X
or for commercial purposes, other	r than using the name and ac	ay not be sold or used by any pers	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In American Hospital Association	•		
Full Name (Last, First, Middle Mr. Gregg Gentry Mailing Address 975 Fast	Initial) Third Street		Date of Receipt
		7'- 0 - 1-	12 10 2008
City <u>Chattanooga</u>	State TN	Zip Code 37403-2163	Transaction ID: 16164067 Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	g C		250.00
Name of Employer Erlanger Medical Center	Occupation Chief Hu	on uman Resources Officer	
Receipt For: Primary Gene Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Mr David C Hogan			Date of Receipt
Mailing Address 350 North	n Humphreys Boulevard		12 10 2008
City	State	Zip Code	Transaction ID: 16164081
Memphis FEC ID number of contributin federal political committee.	g C	38120-2177	Amount of Each Receipt this Period 250.00
Name of Employer Baptist Memorial Health Care Corporati	Occupation Executive	on ve Vice President and Chief (Dpe
Receipt For: Primary Gene Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Stephen Johnson	Initial)		Date of Receipt
Mailing Address 975 East	Third Street		12 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Chattanaga	State TN	Zip Code	Transaction ID: 16164083
Chattanooga FEC ID number of contributin federal political committee.		37403-2147	Amount of Each Receipt this Period 300.00
Name of Employer Erlanger Health System	Occupation Vice Pres	on esident, Prayer Relations	
Receipt For: Primary Gene Other (specify) ▼		e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This P	age (optional)		800.00
TOTAL This Period (last page t	his line number only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 232 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Paul Korth Mailing Address P O Box 340 City	State	Zip Code	Date of Receipt 1 2 1 0 2 0 0 8 Transaction ID: 16164085
Cookeville FEC ID number of contributing federal political committee.	C	38503-0340	Amount of Each Receipt this Period 250.00
Name of Employer Cookeville Regional Medic- al Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	 	n nancial Officer e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr John W Lacey, , M.D. Mailing Address 1924 Alcoa Hwy, Bo	ox 81		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16164086
Knoxville	TN	37920-1511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer University of Tennessee Medical Center Receipt For: Primary General Other (specify) ▼		n ice President and Chief Med e Year-to-Date ▼ 250.00	ica
Full Name (Last, First, Middle Initial) Joel Lee			Date of Receipt
Mailing Address 1161 21st Avenue,	South		12 10 7 2008
City	State	Zip Code	Transaction ID: 16164087
Nashville FEC ID number of contributing federal political committee.	C	37232-0011	Amount of Each Receipt this Period 250.00
Name of Employer Vanderbilt University Med- ical Center Receipt For:		n e Chancellor e Year-to-Date	
Primary General Other (specify) ▼	Aggregate	250.00	
SUBTOTAL of Receipts This Page (optional	al)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Norman Majors		Date of Receipt
Mailing Address 1520 Cherokee Trail Suite 200 City	State Zip Code	12 10 2008
Knoxville	TN 37920-2225	Transaction ID: 16164089 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer University of Tennessee Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Susan O'Hare		Date of Receipt
Mailing Address 975 East Third Street		1 2 1 0 2 0 0 8
City	State Zip Code	Transaction ID: 16164097
Chattanooga	TN 37403-2103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Erlanger Health System	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Jim S Pate		Date of Receipt
Mailing Address P O Box 802		12 10 2008
City	State Zip Code	Transaction ID: 16164098
<u>Erwin</u>	TN 37650-0802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	275.00
Name of Employer Unicoi County Memorial Ho- spital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	275.00	
SUBTOTAL of Receipts This Page (optional)		825.00
TOTAL This Period (last page this line number of		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any ename and address of any political commit	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Stephen Curtis Reynolds Mailing Address 350 North Humphreys City Memphis FEC ID number of contributing federal political committee. Name of Employer Baptist Memorial Health Care Corporati Receipt For:	Boulevard State Zip Code TN 38120-2177 C Occupation President and Chief Executive Of Aggregate Year-to-Date ▼	Date of Receipt M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Steven Ross	500.00	Date of Receipt
Mailing Address 1924 Alcoa Highway, City	State Zip Code	Transaction ID: 16164108
Knoxville FEC ID number of contributing federal political committee.	TN 37920-1511	Amount of Each Receipt this Period 250.00
Name of Employer University of Tennessee Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Asst. Executive Director, Clinical Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Rick Wagers		Date of Receipt
Mailing Address 1211 22nd Avenue So		12 10 2008
City <u>Nashville</u>	State Zip Code TN 37232-2102	Transaction ID: 16164109 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Vanderbilt University Medical Center Receipt For: Primary Other (specify) ▼	Occupation Chief Financial Officer Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using th	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Derick Ziegler Mailing Address PO Box 310		Date of Receipt
City	State Zip Code	1 2 1 0 2 0 0 8 Transaction ID: 16164110
Union City	TN 38281-0310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	280.00
Name of Employer Baptist Memorial Hospital- Union City	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) Mr. William A. Bell		Date of Receipt
Mailing Address 944 Gentian Court		12 12 2008
City	State Zip Code	Transaction ID: 16166439
<u>Tallahassee</u>	FL 32312-1228	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Associat- ion	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Dana Ferrell		Date of Receipt
Mailing Address 3303 Park Street		12 12 2008
City	State Zip Code	Transaction ID: 16166440
<u>Jacksonville</u>	FL 32205-7830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Nemours Children's Clinic	Occupation Director of Government Relations	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional) .		1030.00
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John Wilgis Mailing Address 3036 Giles Place City Tallahassee FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify)	State Zip Code FL 32309-2114 C Occupation Director, Emergency Mgmt. Svcs. Aggregate Year-to-Date 1200.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Kathy Holzer Mailing Address 306 East College A City Tallahassee FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association	State Zip Code FL 32301-1522 C Occupation Vice President, Health Policy	Date of Receipt 1 2 1 2 2 0 0 8 Transaction ID: 16166442 Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Ralph Glatfelter Mailing Address 7285 Heartland Circ	State Zip Code	Date of Receipt 1 2 2 0 0 8 Transaction ID: 16166444
Tallahassee FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Other (specify)	C Occupation Senior Vice President Aggregate Year-to-Date ▼ 1200.00	Amount of Each Receipt this Period 600.00
SUBTOTAL of Receipts This Page (optional	ıl) >	1450.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Kathy A. Reep Mailing Address 19 W. New Hampshir City Orlando FEC ID number of contributing federal political committee.	State Zip Code FL 32804-5911	Date of Receipt 1 2
Name of Employer Florida Hospital Association - Orlando Receipt For: Primary General Other (specify) ▼	Occupation Vice President, Financial Services Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Mark O'Bryant Mailing Address 1300 Miccosukee Roa	ad	Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166446
Tallahassee	FL 32308-5054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General	Occupation President and Chief Executive Office Aggregate Year-to-Date	er
Other (specify) Full Name (Last, First, Middle Initial)	1000.00	
Ms. Phillis Oeters		Date of Receipt
Mailing Address 6855 Red Road, Suite		12 12 2008
City Miami	State Zip Code FL 33143-3632	Transaction ID: 16166447 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Baptist Health South Flor- ida	Occupation Corporate Vice President Governme	ent an
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	•	1000.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 232 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and addi	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Kim Streit			Date of Receipt
	Mailing Address 1317 Eastin Avenue	Stato	Zip Code	12 12 2008
	City Orlando	State FL	32804-6309	Transaction ID: 16166448 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Florida Hospital Associat- ion - Orlando	Occupation VP, Healtl	h Research & Information	
	Receipt For: Primary General Other (specify)	Aggregate '	Year-to-Date ▼ 500.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Rich Rasmussen	1		Date of Receipt
	Mailing Address 405 El Destinado Drive	9		12 12 2008
	City	State	Zip Code	Transaction ID: 16166449
	Tallahassee	<u>FL</u>	32301-1522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Florida Hospital Associat- ion	Occupation VP for Str	ategic Communications	
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 1000.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Michael Galloway			Date of Receipt
	Mailing Address 444 North Capitol Stre Suite 532			12 / 12 / 2008
	City Washington	State DC	Zip Code 20001-1512	Transaction ID: 16166450
	FEC ID number of contributing federal political committee.	C	20001-1312	Amount of Each Receipt this Period 600.00
	Name of Employer Florida Hospital Associat- ion	, ·	ident, Federal Advocacy	
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 1200.00	
	SUBTOTAL of Receipts This Page (optional)			1350.00
F	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 232 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		_
Full Name (Last, First, Middle Initial) Ms. Karen Late, MHS	,	Date of Receipt
Mailing Address 444 N. Capitol St, NW Suite 532 City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166451
Washington	DC 20001-1512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Associat- ion	Occupation Director, Federal Advocacy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Jackson		Date of Receipt
Mailing Address 3390 Dockside Drive		12 12 2008
City	State Zip Code	Transaction ID: 16166452
Hollywood	FL 33026-3780	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Memorial Healthcare System	Occupation System Director, Community Projects	3
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Douglas Baer	1	Date of Receipt
Mailing Address 3599 University Blvd 9	South	12 12 2008
City <u>Jacksonville</u>	State Zip Code FL 32216-4252	Transaction ID: 16166456 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Brooks Rehabilitation Hos- pital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Greg Zorman, M.D. Mailing Address 5730 Arapahoe Roa	d	Date of Receipt
City Fort Lauderdale	State Zip Code FL 33312-6354	Transaction ID: 16166459 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Healthcare System Receipt For:	Occupation Chief of Neurosurgery Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr Larry F Garrison Mailing Address 6450 US Highway 1	-	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166461
Rockledge	FL 32955-5747	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Health First, Inc.	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Tim Eixenberger	-	Date of Receipt
Mailing Address 2982 Castle Wood L	ane	12 12 2008
City	State Zip Code	Transaction ID: 16166468
Clearwater	FL 33759-1810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Bayfront Medical Center	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (optional)	625.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Robert Galloway Mailing Address 1350 South Hickory City	Street State Zip Code	Date of Receipt M
Melbourne FEC ID number of contributing federal political committee.	FL 32901-3278	Amount of Each Receipt this Period
Name of Employer Holmes Regional Medical Center Receipt For: ☐ Primary General Other (specify) ▼	Occupation Senior Vice President Finance and C Aggregate Year-to-Date 250.00	Chie
Full Name (Last, First, Middle Initial) Mr. John E Matuska Mailing Address 3663 South Miami A	venue	Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166471
<u>Miami</u>	FL 33133-4237	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Mercy Hospital	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Chris Roederer		Date of Receipt
Mailing Address 615 Riviera Dunes V	√ay #107	12 12 2008
City Palmetto	State Zip Code FL 34221-7145	Transaction ID: 16166476 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 34221-7143	125.00
Name of Employer Tampa General Hospital	Occupation Vice President for Human Resources	5
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	•	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John R. Brownlow Mailing Address 5608 Bear Lake Circle	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Apopka	<u>-</u> .	Transaction ID: 16166481
FEC ID number of contributing federal political committee.	FL 32703-1916	Amount of Each Receipt this Period 125.00
Name of Employer Florida Hospital Receipt For: Primary General Other (specify) ▼	Occupation Vice President and Chief Operating C Aggregate Year-to-Date ▼ 250.00	Off
Full Name (Last, First, Middle Initial) Ms. Sally Houston Mailing Address 6528 Surfside Blvd.		Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166492
Apollo Beach	FL 33572-3008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tampa General Hospital	Occupation Chief Medical Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) John Bond		Date of Receipt
Mailing Address 3417 Eastmonte Drive		12 12 2008
City	State Zip Code	Transaction ID: 16166509
Valrico	FL 33596-6087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tampa General Hospital	Occupation Vice President, Surgical Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	•	

SCHEDULE A (FI	-	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 232 (check only one) X 11a
Any information copied from for commercial purpos NAME OF COMMITT	es, other than using the name and	may not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital	Association PAC		
Full Name (Last, First Ms. Sally Jackson	,		Date of Receipt
Su	50 College Parkway ite 103	7'- 0-1-	12 12 2008
City <u>Fort Myers</u>	State FL	e Zip Code 33919-5199	Transaction ID: 16166517 Amount of Each Receipt this Period
FEC ID number of confederal political comm			125.00
Name of Employer Lee Memorial Health S	System Occup Syste	ation m Director of Community Proje	ects
Receipt For: Primary Other (specify)	General	gate Year-to-Date ▼ 250.00	
Full Name (Last, First Mr. Richard M Irwin, , Ju	<u>, </u>		Date of Receipt
Mailing Address 50	Lake Street		12 12 2008
City Windermere	State FL	e Zip Code 34786	Transaction ID: 16166535 Amount of Each Receipt this Period
FEC ID number of confederal political commi	ntributing	54700	350.00
Name of Employer Health Central	Occup Presid	ation dent and Chief Executive Office	r
Receipt For: Primary Other (specify)	General	gate Year-to-Date ▼ 700.00	
Full Name (Last, First Ms. Chantal Leconte	Middle Initial)		Date of Receipt
Mailing Address P (D Box 565002, Mail Stop 1		12 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rockledge	State FL	'	Transaction ID: 16166539
FEC ID number of confederal political commit	ntributing	32956-5002	Amount of Each Receipt this Period 125.00
Name of Employer Wuesthoff Medical Ce Rockledge	Admir	nistrator	
Receipt For: Primary Other (specify)	General	gate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts	This Page (optional)		600.00
	t page this line number only)	<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Deana L. Nelson		Date of Receipt
Mailing Address Post Office Box 1289		12 12 2008
City Tampa	State Zip Code FL 33601-1289	Transaction ID: 16166541 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Sr. Vice President, Patient Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Paul Goldstein Mailing Address 1414 Kubl Avenue		Date of Receipt
Mailing Address 1414 Kuhl Avenue		12 12 2008
City Longwood	State Zip Code FL 32806-2093	Transaction ID: 16166542
FEC ID number of contributing federal political committee.	FL 32806-2093	Amount of Each Receipt this Period 125.00
Name of Employer Orlando Regional Healthca- re	Occupation Vice President Finance and Chief Fi	nan
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Jim L Mayo, , FACHE		Date of Receipt
Mailing Address 1250 South 18th Stre	et	12 12 2008
City	State Zip Code	Transaction ID: 16166544
Fernandina Beach FEC ID number of contributing federal political committee.	FL 32034-3098	Amount of Each Receipt this Period 125.00
Name of Employer Baptist Medical Center Na- ssau	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional).		500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Stephen A Purves, , FACHE Mailing Address 1500 SW 1st Ave		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ocala	State Zip Code FL 34474	Transaction ID: 16166551 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 344/4	500.00
	Name of Employer Munroe Regional Medical Center Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00]
-	Full Name (Last, First, Middle Initial) Ms. Lorraine L. Lutton Mailing Address 6508 North River Bould	evard	Date of Receipt 1 2 1 2 2 0 0 8
	City	State Zip Code	Transaction ID: 16166552
	<u>Tampa</u>	FL 33604-6028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer St. Joseph's Hospital	Occupation Chief Operating Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Dr. Donald L Jernigan, , Ph.D.		Date of Receipt
	Mailing Address 111 North Orlando Ave	enue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 16166554
	Winter Park	FL 32789-3675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Adventist Health System Sunbelt Health	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)		1125.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 232 (check only one) X 11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any peename and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Jean Mayer Mailing Address 2408 W. Watrous Ave	nue	Date of Receipt 1 2
City	State Zip Code	Transaction ID: 16166556
<u>Tampa</u>	FL 33629-5343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Tampa General Hospital	Occupation Vice President for Strategic Service	es
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Warren E Jones Mailing Address 1300 Miccosukee Roa		Date of Receipt
Mailing Address 1300 Miccosukee Roa	a	12 12 2008
City	State Zip Code	Transaction ID: 16166558
Tallahassee	FL 32308-5054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tallahassee Memorial Heal- thCare	Occupation Vice President and Chief Commun	ication
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Doug Luckett		Date of Receipt
Mailing Address 12877 Pastures Way		12 12 2008
City	State Zip Code	Transaction ID: 16166561
Fort Myers	FL 33913-7633	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Lee Memorial Health System	Occupation Chief Administrative Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SURTOTAL of Receipts This Page (optional)		625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separat for each cate Detailed Sur	e schedule(s) egory of the	FOR LINE NUMBER: PAGE 58 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or in name and address of any poli	used by any person f tical committee to so	or the purpose of soliciting contributions licit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John Wieist Mailing Address 2403 South West 43rd City	Street State Zip Code		Date of Receipt M
Cape Coral	FL 33914	-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Lee Memorial Hospital Receipt For: Primary General	Occupation Chief Financial Officer Aggregate Year-to-Date		
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Sue G Brody Mailing Address 701 Sixth Street South	0 0 0 0 0	200.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 16166566
Saint Petersburg	FL 33701-489	91	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Bayfront Medical Center	Occupation President and Chief Ex	xecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	1000.00	
Full Name (Last, First, Middle Initial) Ms Ginger Oliver			Date of Receipt
Mailing Address P O Box 1289			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 16166568
<u>Tampa</u>	FL 33601-128	39	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Tampa General Hospital	Occupation Vice President Informa	ation Systems	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 232 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Hugh Greene Mailing Address 800 Prudential Drive City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Health	State Zip Code FL 32207-8202 C Occupation	Date of Receipt M M
Receipt For: Primary General Other (specify)	President and Chief Executive Office Aggregate Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Mr. George Mikitarian, , Jr. Mailing Address 951 North Washingtor	n Avenue	Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166571
Titusville FEC ID number of contributing federal political committee.	FL 32796-2163	Amount of Each Receipt this Period 125.00
Name of Employer Parrish Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Ronald A Hytoff		Date of Receipt
Mailing Address P O Box 1289		12 12 2008
City	State Zip Code	Transaction ID: 16166574
Tampa FEC ID number of contributing federal political committee.	FL 33601-1289	Amount of Each Receipt this Period 500.00
Name of Employer Tampa General Hospital	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
	1	1125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Diane S. Raines Mailing Address 4090 San Jose Boule	vard	Date of Receipt
City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166578
Jacksonville	FL 32207-6063	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Baptist Health	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Robert D. Moon	. L	Date of Receipt
Mailing Address PO Box 9400		12 12 2008
City	State Zip Code	Transaction ID: 16166580
Sebring	FL 33871-9400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital Heartland Division	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Steven Short		Date of Receipt
Mailing Address P O Box 1289		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166583
Tampa	FL 33601-1289	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tampa General Hospital	Occupation Executive VP, Finance and Administr	rati
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		500.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 232 (check only one) X
	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. James R Nathan Mailing Address 2776 Cleveland Avenue		Date of Receipt 1 2 1 2 2 0 0 8
	City Fort Myors	State Zip Code FL 33901-5864	Transaction ID: 16166584
	Fort Myers FEC ID number of contributing federal political committee.	FL 33901-5864	Amount of Each Receipt this Period 500.00
	Name of Employer Lee Memorial Health System Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 1000.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr. Jerry Senne Mailing Address 233 Salvador Square		Date of Receipt 1 2 1 2 2 0 0 8
	City	State Zip Code	Transaction ID: 16166589
	Winter Park	FL 32789-5618	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Health First, Incorporated	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms. Kathleen Murray		Date of Receipt
	Mailing Address 13286 Stone Pond Driv	e	12 12 2008
	City	State Zip Code	Transaction ID: 16166590
	Jacksonville FEC ID number of contributing federal political committee.	FL 32224-1622	Amount of Each Receipt this Period 125.00
	Name of Employer Baptist Medical Center	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		875.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any i	nformation copied from such Reports and S	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
N	AME OF COMMITTEE (In Full) merican Hospital Association PAC	**	
	ull Name (Last, First, Middle Initial) Ir. Larry J Archbell		Date of Receipt
_	ailing Address 3100 East Fletcher Avo	enue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
С	ity	State Zip Code	Transaction ID: 16166595
<u>T</u>	ampa	FL 33613-4613	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	125.00
N U ita	ame of Employer niversity Community Hosp-	Occupation Chief Executive Officer	
	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	ull Name (Last, First, Middle Initial) Ir. Marvin Kurtz		Date of Receipt
M	ailing Address 4967 Anniston Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C	ity	State Zip Code	Transaction ID: 16166598
<u></u>	ampa	FL 33647-2310	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	125.00
N U ita	ame of Employer niversity Community Hosp- al	Occupation Chief Financial Officer	
	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	ull Name (Last, First, Middle Initial) Ir. Tony N Bennett		Date of Receipt
M	ailing Address 1847 Florida Avenue		12 12 2008
C	ity	State Zip Code	Transaction ID: 16166600
<u>P</u>	anama City	FL 32405-4640	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	150.00
N H R	ame of Employer EALTHSOUTH Emerald Coast ehabilitati	Occupation Chief Executive Officer	
R	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Linda L Brown Mailing Address 14890 Shrike Way City	State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Fort Myers FEC ID number of contributing federal political committee.	FL 33908-8105	Amount of Each Receipt this Period 50.00
Name of Employer Lee Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Mr George Fayer Mailing Address P O Box 565002, Mail	Stop 1	Date of Receipt
City	State Zip Code	Transaction ID: 16166604
Rockledge	FL 32956-5002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Wuesthoff Medical Center - Rockledge Receipt For: Primary General	Occupation Chief Financial Officer Aggregate Year-to-Date	
Other (specify) Full Name (Last, First, Middle Initial)	250.00	
Mr John F Wilbanks Mailing Address 800 Prudential Drive		Date of Receipt
City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16166606
<u>Jacksonville</u>	FL 32207-8202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Baptist Medical Center	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		300.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Marianne Hillegass Mailing Address 3561 Sanctuary Blvd. City Jacksonville FEC ID number of contributing	State Zip Code FL 32250-2571	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify) ▼	Occupation Vice President, Operations Aggregate Year-to-Date 300.00	
Full Name (Last, First, Middle Initial) Mr. Emil P Miller Mailing Address 110 Longwood Avenue	9	Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166612
Rockledge FEC ID number of contributing federal political committee.	FL 32955-2828	Amount of Each Receipt this Period 500.00
Name of Employer Wuesthoff Health System Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 1000.00	<u>. </u>
Full Name (Last, First, Middle Initial) Ms. Marilyn Stout		Date of Receipt
Mailing Address 2776 Cleveland Avenu	ie	12 12 2008
City Fort Myers	State Zip Code FL 33901-5855	Transaction ID: 16166614 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Lee Memorial Hospital	Occupation Board Member	7
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		775.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 232 (check only one) X 11a
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Ms. Judith Ploszek			Date of Receipt
	Mailing Address 2863 Bayshore Trails [Drive		12 12 2008
	City	State FL	Zip Code	Transaction ID: 16166615
	Tampa FEC ID number of contributing federal political committee.	C	33611-5525	Amount of Each Receipt this Period 125.00
	Name of Employer Tampa General Hospital	Occupation Vice Pres	n ident Finance	
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
_ В.	Full Name (Last, First, Middle Initial) Ms. Mary McGillicuddy Mailing Address 2820 SE 19th Place			Date of Receipt
				12 12 2008
	City Cape Coral	State FL	Zip Code 33904-4015	Transaction ID: 16166617
	FEC ID number of contributing federal political committee.	C	33904-4013	Amount of Each Receipt this Period 125.00
	Name of Employer Lee Memorial Hospital	Occupation Chief Leg	n al Counsel	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Kenneth R Mattison			Date of Receipt
	Mailing Address 1000 Waterman Way			12 12 2008
	City	State	Zip Code	Transaction ID: 16166619
	Tavares FEC ID number of contributing federal political committee.	FL C	32778-5266	Amount of Each Receipt this Period 125.00
	Name of Employer Florida Hospital Waterman	Occupation President	and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			375.00
t	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e Check only one)
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by an ename and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Daryl Tol Mailing Address 701 West Plymouth A		Date of Receipt 12 12 2008
City	State Zip Code	Transaction ID: 16166630
<u>Deland</u>	FL 32720-3236	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital - De Land	Occupation President and Chief Executive (Officer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.0	00 "
Full Name (Last, First, Middle Initial) Mr. Lars Houmann		Date of Receipt
Mailing Address 601 East Rollins Stree		12 12 2008
City	State Zip Code	Transaction ID: 16166631
Orlando FEC ID number of contributing federal political committee.	FL 32803-1248	Amount of Each Receipt this Period 550.00
Name of Employer Florida Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.	00
Full Name (Last, First, Middle Initial) Mr Steven M Klein		Date of Receipt
Mailing Address 1611 NW 12th Avenu		12 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166632
<u>Miami</u>	FL 33136-1005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Memorial Hospital	Occupation Executive Vice President and C	hief Ope
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.	00
SUBTOTAL of Receipts This Page (optional) .		925.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 232 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and addi	not be sold or used by any persoress of any political committee to	13 14 15 16 on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Kristy Rigot			Date of Receipt
Mailing Address 12730 Dreden Ct.			12 12 2008
City	State	Zip Code	Transaction ID: 16166634
Fort Myers	FL	33912-4663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Lee Memorial Hospital	Occupation Director o	f Corporate Staffing	
Receipt For:		Year-to-Date ∇	\dashv
Primary General Other (specify) ▼	Aggregate	250.00	
Full Name (Last, First, Middle Initial) Deanna Schaefer			Date of Receipt
Mailing Address 16 Remington Road			1 2 1 2 2 0 0 8
City	State	Zip Code	Transaction ID: 16166647
Ormond Beach	FL	32174-2527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Halifax Health Medical Ce- nter	Occupation Administra		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Jason Moore			Date of Receipt
Mailing Address 2112 Doral Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16166649
Tallahassee	FL	32312-3159	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Tallahassee Memorial Heal- thCare	Occupation Chief Ope	erating Officer	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
			625.00

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate s for each catego Detailed Sumn	schedule(s) ory of the	FOR LINE NUMBER: PAGE 68 / 232 (check only one) X
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or us name and address of any politic	ed by any person feal committee to so	or the purpose of soliciting contributions licit contributions from such committee.
	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Dennis Proul Mailing Address 11873 Wexford Blvd.			Date of Receipt
	TIG/3 WEXIDIO BIVO.			12 12 2008
	City	State Zip Code FL 34609-9260	-	Transaction ID: 16166662
	Spring Hill FEC ID number of contributing federal political committee.	FL 34609-9260	0	Amount of Each Receipt this Period 250.00
	Name of Employer Jackson Health System	Occupation SVP&CIO		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	500.00	
	Full Name (Last, First, Middle Initial) Mr. J. Brian Paradis			Date of Receipt
	Mailing Address 1051 Oakpoint Circle			12 12 2008
	City	State Zip Code		Transaction ID: 16166666
	<u>Apopka</u>	FL 32712-3704		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer Florida Hospital	Occupation Chief Financial Officer		
	Receipt For: Primary General	Aggregate Year-to-Date ▼		
	Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Mr. Steve Adriaanse			Date of Receipt
	Mailing Address 3042 Fermanagh Drive			M M / D D / Y Y Y Y Y 12 12 2008
	City	State Zip Code		Transaction ID: 16166673
	Tallahassee	FL 32309-3333		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0	125.00
	Name of Employer Tallahassee Memorial Heal- thCare	Occupation HR Administrator		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	250.00	
Γ	SUBTOTAL of Receipts This Page (optional)			500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 232 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Frank Barrett Mailing Address 1611 NW 12th Avenue City Miami	State Zip Code FL 33136-1005	Date of Receipt 1 2 1 2 2 0 0 8 Transaction ID: 16166676 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Jackson Memorial Hospital Receipt For: Primary General Other (specify)	Occupation Executive Vice President Corporate A Aggregate Year-to-Date 500.00	250.00
Full Name (Last, First, Middle Initial) Mr. Eric Peburn Mailing Address 7 Fairvinds Circle City	State Zip Code	Date of Receipt 1 2 1 2 2 0 0 8 Transaction ID: 16166679
Ormond Beach FEC ID number of contributing federal political committee. Name of Employer	FL 32176-2195 C Occupation	Amount of Each Receipt this Period 125.00
Halifax Health Medical Center Receipt For: ☐ Primary ☐ General Other (specify) ▼	CFO Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Nathan Anspach Mailing Address 1511 Algardi Avenue		Date of Receipt
City Coral Gables	State Zip Code FL 33146-1003	Transaction ID: 16166680 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Jackson Health System	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Joe Petrock Mailing Address 303 North Clyde Morr City Daytona Beach FEC ID number of contributing federal political committee. Name of Employer Halifax Community Health	is Blvd State Zip Code FL 32114-2709 C Occupation Director Community Relations	Date of Receipt M M
System Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Isaac Mallah Mailing Address P O Box 4227		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166687
Tampa FEC ID number of contributing federal political committee.	FL 33677-4227	Amount of Each Receipt this Period 250.00
Name of Employer St. Joseph's Hospital	Occupation President and Chief Executive Office	cer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Bonnie Bowls		Date of Receipt
Mailing Address 121 NW Ivanhoe Blvc		12 12 2008
City <u>Orlando</u>	State Zip Code FL 32804-5958	Transaction ID: 16166688 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Florida Hospital Associat- ion	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	•	500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Gerard A Kaiser, , M.D. Mailing Address 1611 NW 12th Avenu	ıe	Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166689
Miami FEC ID number of contributing federal political committee.	FL 33136-1094	Amount of Each Receipt this Period 250.00
Name of Employer Jackson Health System Receipt For: Primary General Other (specify) ▼	Occupation Executive Vice President and Chief M Aggregate Year-to-Date 500.00	Лed
Full Name (Last, First, Middle Initial) Fran Davis Mailing Address 1242 Harbour Point I	Drive	Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166693
Port Orange	FL 32127-5608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Halifax Health Medical Ce- nter	Occupation Hospice Admin CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Olga Dazzo		Date of Receipt
Mailing Address 1111 Crandon Blvd.,	A-507	12 12 2008
City	State Zip Code	Transaction ID: 16166695
Key Biscayne FEC ID number of contributing	FL 33149-2623	Amount of Each Receipt this Period
federal political committee.	C	250.00
Name of Employer Jackson Health System	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	······	625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jeff Feasel Mailing Address 303 North Clyde Morr City Daytona Beach FEC ID number of contributing federal political committee. Name of Employer Halifax Community Health System	is Blvd State Zip Code FL 32114-2709 C Occupation Chief Executive Officer	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth Bradley Mailing Address 200 North Lakemont	Avenue	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16166708
Winter Park FEC ID number of contributing federal political committee.	FL 32792-3273	Amount of Each Receipt this Period 125.00
Name of Employer Winter Park Memorial Hosp- ital	Occupation Administrator	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. William G Ulbricht		Date of Receipt
Mailing Address P O Box 12588		M M / D D / Y Y Y Y Y 1 1 2 1 2 0 0 8
City	State Zip Code	Transaction ID: 16166710
Saint Petersburg	FL 33733-2588	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer St. Anthony's Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
		500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John Mahoney, MD Mailing Address 2920 Ivanahoe Road City Tallahassee FEC ID number of contributing federal political committee.	State Zip Code FL 32312-2824 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Tallahassee Memorial Heal- thCare Receipt For: Primary General Other (specify) ▼	Occupation Chief Medical Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Timothy W Cook Mailing Address P O Box 9400		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sebring FEC ID number of contributing federal political committee.	State Zip Code FL 33871-9400	Transaction ID: 16166713 Amount of Each Receipt this Period 250.00
Name of Employer Florida Hospital Heartland Medical Cen Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Arvin Lewis Mailing Address 778 Foxhound Drive		Date of Receipt
Mailing Address 778 Foxhound Drive City Port Orange	State Zip Code FL 32128-7003	Transaction ID: 16166718 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Halifax Community Health System Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)	625.00

City State Zip Code Pensacola FL 32501-6377 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Care Corporation Receipt For: Primary General Other (specify) ▼ Name of Employer Baptist Health Care Corporation Receipt For: Primary General Other (specify) ▼ State Zip Code President Aggregate Year-to-Date ▼ Tallahassee FL 32312-6766 Tallahassee FEC ID number of contributing federal political committee. Primary General Occupation Vice President Aggregate Year-to-Date ▼ Transaction ID: 16166719 Amount of Each Receipt this Date of Receipt Transaction ID: 16166719 Amount of Each Receipt this Date of Receipt Transaction ID: 16166719 Amount of Each Receipt this Primary General Occupation Vice President Receipt For: Primary General Other (specify) ▼ Primary General Other (specify) ▼ Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mr. Paul Belicher Mailing Address Rt. 15, Box 241 Transaction ID: 16166734	\vdash	FOR LINE NUMBER: PAGE 7 (check only one) X 11a 11b 11c 1 13 14 15	Use separate schedule(s) for each category of the Detailed Summary Page		DULE A (FEC Form 3X) ZED RECEIPTS	
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mailing Address 1717 North 'E' Street, Ste 320 City State Zip Code Tanasaction ID: 16166719 Pensacola FL 32501-6377 FEC ID number of contributing federal political committee. Name of Employer Tallahassee FL 32312-6766 FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ State Zip Code Tanasaction ID: 16166720 Aggregate Year-to-Date ▼ Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt Tanasaction ID: 16166719 Amount of Each Receipt this Date of Receipt Transaction ID: 16166719 Amount of Each Receipt this Date of Receipt Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt Transaction ID: 16166720 Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt ID: 12	ontributions committee.	n for the purpose of soliciting contribu solicit contributions from such commi	not be sold or used by any perso dress of any political committee to	Statements may ne name and add	mation copied from such Reports and S mmercial purposes, other than using the	An
Mailing Address 1717 North 'E' Street, Ste 320 City State Zip Code Personacola FL 32501-6377 FEC ID number of contributing federal political committee. Name of Employer Baptist Health Care Corporation Receipt For: Primary General Occupation President PL 32312-6766 FEC ID number of contributing federal political committee. Name of Employer General Occupation President					, ,	
City State Zip Code Pensacola FL 32501-6377 Amount of Each Receipt this FEC ID number of contributing federal political committee. Name of Employer Primary General Other (specify) ▼		⊣		2: 222	fred G Stubblefield	۸.
Pensacola FEC ID number of contributing federal political committee. Name of Employer Baptist Health Care Corporation Receipt For: Primary General Other (specify) ▼ Date of Receipt Mailing Address 7935 Preservation Road Date of Receipt Intia Blair Mailing Address 7935 Preservation Road Date of Receipt Intia Blair Mailing Address 7935 Preservation Road City State Zip Code Tallahassee FL 32312-6766 Name of Employer Tallahassee Memorial HealthCare Receipt For: Primary General Occupation Vice President Mailing Address Rt. 15, Box 241 City State Zip Code Transaction ID: 16166734 Amount of Each Receipt this Date of Receipt Intia In	2008	12 12 2	Zin Code		g Address 1/1/ North 'E' Street,	
FEC ID number of contributing federal political committee. Name of Employer Bapits Health Care Corporation Receipt For: Primary General Other (specify) ▼ 1000.00 Full Name (Last, First, Middle Initial) Ms. Cynthia Blair Mailing Address 7935 Preservation Road City State Zip Code Tallahassee FL 32312-6766 FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial Heal-thCare Receipt For: Primary General Other (specify) ▼ 250.00 Full Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City State Zip Code Tallahassee Memorial Heal-thCare Receipt For: Primary General Other (specify) ▼ 250.00 Date of Receipt Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt Transaction ID: 16166734 Amount of Each Receipt Transaction ID: 16166734 Tallahassee FL 32311 City State Zip Code Tallahassee FL 32311 City State Zip Code Tallahassee FL 32311 City State Zip Code Tallahassee FL 32311 City Gressient State Sip Code Tallahassee FL 32311 City State Sip Code Transaction ID: 16166734 Amount of Each Receipt this C Name of Employer Forda Hospital Associat- Ion Receipt For: Primary General Occupation Senior Vice President Aggregate Year-to-Date ▼ Primary General			·		sacola	
Receipt For: Primary General Other (specify) ▼	500.00		0.2501.0017		ID number of contributing	
Primary					<u> </u>	
Ms. Cynthia Blair Mailing Address 7935 Preservation Road City State Zip Code Transaction ID: 16166720 Tallahassee FL 32312-6766 FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City State Zip Code Transaction ID: 16166734 Transaction ID: 16166734 Transaction ID: 16166734 Aggregate Year-to-Date ▼ Transaction ID: 16166734 Amount of Each Receipt this Date of Receipt this Transaction ID: 16166734 Amount of Each Receipt this C Transaction ID: 16166734 Amount of Each Receipt this C Transaction ID: 16166734 Amount of Each Receipt this FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Senior Vice President Receipt For: Primary General			1000.00	Aggregate	Primary General	
City State Zip Code Tallahassee FL 32312-6766 FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City State Zip Code Transaction ID: 16166720 Amount of Each Receipt this Date of Receipt Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City State Zip Code Transaction ID: 16166734 Amount of Each Receipt this Date of Receipt Transaction ID: 16166734 Amount of Each Receipt this Date of Receipt Transaction ID: 16166734 Amount of Each Receipt this C Name of Employer Florida Hospital Association Receipt For: Primary General 1000.00		Date of Receipt			ynthia Blair	 3.
Tallahassee FL 32312-6766 FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare Receipt For: Primary General Other (specify) ▼ City State Zip Code FL 32311 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Name of Employer Florida Hospital Association Receipt For: Name of Employer Florida Hospital Association Receipt For: Primary General Occupation Senior Vice President Amount of Each Receipt this Amount of Each Receipt this	2008			oad	g Address 7935 Preservation Roa	
FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City State Zip Code Tallahassee FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Name of Employer Florida Hospital Association Receipt For: Primary General Occupation Senior Vice President Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ 1000.00		Transaction ID: 16166720	Zip Code	State		
Receipt For: Date of Receipt For: Aggregate Year-to-Date ▼	this Period	Amount of Each Receipt this Pe	32312-6766	FL	hassee	
Tallahassee Memorial Heal- thCare Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City State Zip Code Transaction ID: 16166734 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Vice President Aggregate Year-to-Date Vice President Aggregate Year-to-Date Occupation Senior Vice President Aggregate Year-to-Date Aggregate Year-to-Date Vice President	125.00	12		C		
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mr. Paul Belcher Mailing Address Rt. 15, Box 241 City State Zip Code Tallahassee FL 32311 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Aggregate Year-to-Date ▼ 1000.00					nassee Memorial Heal-	
Mr. Paul Beicher Mailing Address Rt. 15, Box 241 City State Zip Code Tallahassee FL 32311 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Date of Receipt Transaction ID: 16166734 Amount of Each Receipt this				Aggregate	Primary General	
City State Zip Code Transaction ID: 16166734 Tallahassee FL 32311 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General State Zip Code Transaction ID: 16166734 Amount of Each Receipt this C Aggregate Year-to-Date ▼		Date of Receipt			,	_
Tallahassee FL 32311 Amount of Each Receipt this FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Receipt For: Primary General Aggregate Year-to-Date ▼	2008				g Address Rt. 15, Box 241	
FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Association Senior Vice President Receipt For: Primary General General Aggregate Year-to-Date ▼	734	Transaction ID: 16166734	Zip Code			
Name of Employer Florida Hospital Association Receipt For: Primary General Occupation Senior Vice President Aggregate Year-to-Date 1000.00	this Period	Amount of Each Receipt this Pe	32311	<u>FL</u>	hassee	
Florida Hospital Association Receipt For: Primary General Senior Vice President Aggregate Year-to-Date	500.00	50		C		
Receipt For: Aggregate Year-to-Date ▼ Primary General					e of Employer a Hospital Associat-	
1000.00		1				
			1000.00			
SUBTOTAL of Receipts This Page (optional)	1125.00	112			TAL of Receipts This Page (optional)	S.
TOTAL This Period (last page this line number only)			·			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Stephen Mason Mailing Address 3909 Snapper Poin City	te Drive State Zip Code	Date of Receipt M M
Tampa FEC ID number of contributing federal political committee.	FL 33611-1030	Amount of Each Receipt this Period 500.00
Name of Employer BayCare Health System Receipt For: Primary General Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr Richard Mutarelli Mailing Address P O Box 6000		Date of Receipt 1 2 1 2 2 0 0 8
City	State Zip Code	Transaction ID: 16166741
<u>Ocala</u>	FL 34478-6000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Munroe Regional Medical Center	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Clifford J. Bauer		Date of Receipt
Mailing Address 401 North West 13	1st Avenue	12 12 2008
City	State Zip Code FL 33325	Transaction ID: 16166743
Plantation FEC ID number of contributing federal political committee.	FL 33325	Amount of Each Receipt this Period 125.00
Name of Employer North Ridge Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	ı II)	750.00

FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Randall L. Haffner Mailing Address 900 Cranes Street City State Zip 0 Maitland FL 327 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Receipt For: Primary General Occupation Chief Operating 0 Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Eddie Soler Mailing Address 250 Kentucky blue Circle City State Zip 0 State Zip 0 Aggregate Year-to-legical State Zip 0 State Zip 0 State Zip 0 State Zip 0	Date of Receipt M M M
Mr. William A Giudice Mailing Address 1300 Miccosukee Road City State Zip of Tallahassee FL 323 FEC ID number of contributing federal political committee. Name of Employer Tallahassee Memorial HealthCare Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Randall L. Haffner Mailing Address 900 Cranes Street City State Zip of Maitland FL 327 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Receipt For: Primary General Occupation Chief Operating of Chief Operating	M M
thCare Receipt For:	Date of Receipt M
Mr. Randall L. Haffner Mailing Address 900 Cranes Street City State Zip 0 Maitland FL 327 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Receipt For: Aggregate Year-to-I Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Eddie Soler Mailing Address 250 Kentucky blue Circle City State Zip 0	12 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Maitland FL 327 FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Eddie Soler Mailing Address 250 Kentucky blue Circle City State Zip 6	ode Transaction ID: 16166752
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Ms. Eddie Soler Mailing Address 250 Kentucky blue Circle City State Zip O	Amount of Each Receipt this Period 125.00
Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Eddie Soler Mailing Address 250 Kentucky blue Circle City State Zip 6	
Ms. Eddie Soler Mailing Address 250 Kentucky blue Circle City State Zip 0	250.00
	Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	125.00
Name of Employer Occupation Florida Hospital CFO	
Receipt For: Primary General Other (specify)	
SUBTOTAL of Receipts This Page (optional)	ate ▼ 250.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 232 (check only one) X
, c	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and addr	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
ب 4.	Full Name (Last, First, Middle Initial) Mr. Charles Gibson			Date of Receipt
	Mailing Address 3485 Stately Oaks Lar	ne 		12 12 2008
	City Duluth	State GA	Zip Code 30097-5155	Transaction ID: 16166755 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Marshall Erdman & Associa- tes	Occupation Director o	f Business Development	
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Robert A. Malson			Date of Receipt
	Mailing Address 1850 Redwood Terrac	e, NW		12 11 2008
	City	State DC	Zip Code	Transaction ID: 16167429
	Washington FEC ID number of contributing federal political committee.	C	20012-1023	Amount of Each Receipt this Period 350.00
	Name of Employer District of Columbia Hosp- ital Associat	Occupation President	& Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 350.00	
_ ;.	Full Name (Last, First, Middle Initial) Mr. Michael D Connelly			Date of Receipt
	Mailing Address 615 Elsinore Place			1 2 1 0 2 0 0 8
	City	State	Zip Code	Transaction ID: 16167438
	Cincinnati FEC ID number of contributing federal political committee.	C	45202-1459	Amount of Each Receipt this Period 1000.00
	Name of Employer Catholic Healthcare Partn- ers	Occupation President	and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)		1	1600.00
F	TOTAL This Period (last page this line number		<u> </u>	

or fo	information copied from such Reports and S r commercial purposes, other than using the IAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may r	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A. <u>N</u>	American Hospital Association PAC ull Name (Last, First, Middle Initial)			
4. <u>N</u>				
IV	Mr. Matthew D. Williams Mailing Address 615 Elsinore Place			Date of Receipt
_				12 10 2008
	^{Sity} Sincinnati	State OH	Zip Code 45202-1459	Transaction ID: 16167440 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	1000	500.00
	lame of Employer Catholic Healthcare Partn- rs	Occupation VP, Advoc	acy and Government Rela	— tions
	eceipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 500.00	
3. <u>N</u>	rull Name (Last, First, Middle Initial) Mr. James R. Gravell			Date of Receipt
IV	Mailing Address 2615 East High Street			12 10 2008
	ity	State OH	Zip Code	Transaction ID: 16167441
F	Springfield EC ID number of contributing ederal political committee.	C	45505-1412	Amount of Each Receipt this Period 500.00
<u>ir</u>	lame of Employer Community Hospital of Spr- ngfield	Occupation President	and Chief Executive Office	r
F	Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 500.00]
	ull Name (Last, First, Middle Initial) Michael Bezney			Date of Receipt
M	Mailing Address 615 Elsinore Place			1 2 1 0 2 0 0 8
	City	State	Zip Code	Transaction ID: 16167451
F	Cincinnati EC ID number of contributing ederal political committee.	OH C	45202-1459	Amount of Each Receipt this Period 500.00
	lame of Employer Catholic Healthcare Partn- rs	Occupation Senior VP	, General Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 500.00	
SUI	BTOTAL of Receipts This Page (optional)			1500.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Ms. Marie Beatrice Grause, RN, JD		Date of Receipt
	Mailing Address 1580 North Street		12 11 7 2008
	City Montpelier	State Zip Code VT 05602-2997	Transaction ID: 16173255
	FEC ID number of contributing federal political committee.	C 03002-2397	Amount of Each Receipt this Period 1000.00
	Name of Employer Vermont Association of Ho- spitals & Hea	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Harvey M Yorke		Date of Receipt
	Mailing Address 100 Hospital Drive Eas	st	12 11 2008
	City	State Zip Code	Transaction ID: 16173258
	Bennington FEC ID number of contributing federal political committee.	VT 05201-5004	Amount of Each Receipt this Period 350.00
	Name of Employer Southwestern Vermont Medi- cal Center	Occupation President and Chief Executive Office	per
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) Mr. Vincent J McCorkle, , CHE	I	Date of Receipt
	Mailing Address P O Box 9012		12 15 2008
	City	State Zip Code	Transaction ID: 16173274
	Springfield FEC ID number of contributing federal political committee.	MA 01102-9012	Amount of Each Receipt this Period 350.00
	Name of Employer Mercy Medical Center	Occupation President and Chief Executive Office	per l
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Γ	SUBTOTAL of Receipts This Page (optional)		1700.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Eileen Dohmann		Date of Receipt
Mailing Address 6508 Flowerdew Hu		12 11 2008
City	State Zip Code	Transaction ID: 16173279
Centreville	VA 20120-3755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer Mary Washington Hospital	Occupation Vice President, Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	
Full Name (Last, First, Middle Initial) Dr. Robert Reid, , M.D.		Date of Receipt
Mailing Address P O Box 689		12 12 2008
City	State Zip Code	Transaction ID: 16173280
Santa Barbara	CA 93102-0689	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Cottage Health System	Occupation Director Medical Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Thomas C Porter		Date of Receipt
Mailing Address 91 Titicut Rd		12 15 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16173281
Raynham	MA 2767	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Morton Hospital and Medic- al Center	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
	1	1575.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using a NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gary D. Aden Mailing Address 636 San Julio Rd City Solana Beach FEC ID number of contributing federal political committee. Name of Employer Integrated Healthcare Strategies	State Zip Code CA 92075-1811 C Occupation Senior Vice President, Consultant	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. John B. Day Mailing Address 101 Page Street City	State Zip Code	Date of Receipt M
New Bedford FEC ID number of contributing federal political committee. Name of Employer Southcoast Hospitals Group	MA 02740-3400 C Occupation	Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify)	President & Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Catherine M. Crowley Mailing Address 2100 Poplar Ridge F	Road	Date of Receipt
City	State Zip Code	Transaction ID: 16175335
Pasadena FEC ID number of contributing federal political committee.	MD 21122-3820	Amount of Each Receipt this Period 600.00
Name of Employer Maryland Hospital Associa- tion	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		2100.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 232 (check only one) X
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American Hospital Association F	s and Statements may not be sold or used by any persor ing the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Kenneth A Samet Mailing Address 5565 Sterrett Pla	uca 5th Floor	Date of Receipt
City Columbia	State Zip Code MD 21044-2665	1 2 1 5 2 0 0 8 Transaction ID: 16175337 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer MedStar Health Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Operating Officer Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr. William G Robertson Mailing Address 1801 Research E	Blvd, Ste 400	Date of Receipt 1 2 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 16175338
Rockville	MD 20850-3184	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Adventist HealthCare	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) Judith Feustle		Date of Receipt
Mailing Address 1550 Doxbury Ro	d	12 15 2008
City	State Zip Code	Transaction ID: 16175340
Baltimore FEC ID number of contributing federal political committee.	MD 21286-5903	Amount of Each Receipt this Period 300.00
Name of Employer Union Memorial Hospital	Occupation Board Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (opti	onal)	1800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may ne name and add	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Laurie A Brown Mailing Address 5204 Ridge Drive NE City Tacoma FEC ID number of contributing federal political committee. Name of Employer Franciscan Health System Receipt For:	State WA C Occupatio Director	Care Management Services	Date of Receipt 1 2 1 1 2 2 0 0 8 Transaction ID: 16176022 Amount of Each Receipt this Period 175.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date 250.00	
Ms. Nancy Steiger Mailing Address 2543 Mt. Baker Hight City Bellingham FEC ID number of contributing federal political committee. Name of Employer St. Joseph Hospital Receipt For: Primary General Other (specify)	State WA C Occupatio Chief Exc	Zip Code 98226-9566 n ecutive Officer e Year-to-Date ▼ 675.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Richard A Bryan Mailing Address 1035 116th Avenue N City Bellevue FEC ID number of contributing federal political committee. Name of Employer Overlake Hospital Medical Center Receipt For: Primary General	State WA C Occupatio Quality 8	k Patient Safety Chief Compli e Year-to-Date ▼	Date of Receipt M
Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			600.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 232 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	<u> </u>	2000 C. W.) PONICE CO	
Full Name (Last, First, Middle Initial) Mr. James C Cannon			Date of Receipt
Mailing Address 12844 Military Roa	d South		12 11 2008
City Seattle	State WA	Zip Code 98168-9981	Transaction ID: 16176111 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Regional Hospital for Res- piratory and Receipt For:	- 	n rator and Chief Executive Of Year-to-Date ▼	fi
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Cochrell			Date of Receipt
Mailing Address 23986 Vinland Terr	NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Poulsbo	State WA	Zip Code 98370-9416	Transaction ID: 16176112
FEC ID number of contributing federal political committee.	C	90370-9410	Amount of Each Receipt this Period 250.00
Name of Employer Harrison Medical Center	Occupation CEO	n	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Medrice Coluccio			Date of Receipt
Mailing Address P O Box 3002			1 2 1 1 2 2 0 0 8
City	State	Zip Code	Transaction ID: 16176189
Longview FEC ID number of contributing federal political committee.	C	98632-0302	Amount of Each Receipt this Period 250.00
Name of Employer St. John Medical Center	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and State or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any persor name and address of any political committee to s	of for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		_
Full Name (Last, First, Middle Initial) Mr. Patricia Degroodt Mailing Address 1330 Rockefeller		Date of Receipt
P.O. Box 1147	7.0	12 11 2008
City Everett	State Zip Code WA 98201-1684	Transaction ID: 16176190 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30201-1004	250.00
Name of Employer Providence Health System/- NWSA Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 250.00	- -
Full Name (Last, First, Middle Initial) Mr. Dan Dixon		Date of Receipt
Mailing Address 747 Broadway Avenue		12 11 2008
City	State Zip Code	Transaction ID: 16176191
Seattle	WA 98122-4379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Swedish Health Services	Occupation Administrator]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Gerard Fischer		Date of Receipt
Mailing Address 5909 West Pima Court		12 11 2008
City	State Zip Code	Transaction ID: 16176192
Spokane	WA 99208-9010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sacred Heart Medical Cent- er	Occupation Vice President- Systems Development	t
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number of	<u> </u>	

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for comm	ation copied from such Reports and Sta nercial purposes, other than using the r OF COMMITTEE (In Full) can Hospital Association PAC	atements ma name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Mr. Hard	me (Last, First, Middle Initial) old S Geller Address 315 North 14th Street	State WA	Zip Code 99344-1297	Date of Receipt 1 2 1 1 2 2 0 0 8 Transaction ID: 16176193 Amount of Each Receipt this Period
Name o Othello	number of contributing political committee. f Employer Community Hospital For: rimary General ther (specify)	Occupatio Administ Aggregate		250.00
B. Mr. Stua	ne (Last, First, Middle Initial) urt Hennessey Address 14432 SE Eastgate Wa	y, Ste 300 State WA	Zip Code	Date of Receipt 1 2 1 1 2 2 0 0 8 Transaction ID: 16176194
Receipt	number of contributing political committee. f Employer lealth	Occupatio Senior V	98007-6412 n ice President Legal Services e Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 250.00
Ms. Judy Mailing City Samm FEC ID	me (Last, First, Middle Initial) y Hodgson Address 2830 206th Terrace NE amish number of contributing political committee.	State WA	Zip Code 98074-4369	Date of Receipt 1 2 1 1 2 2 0 0 8 Transaction ID: 16176195 Amount of Each Receipt this Period 250.00
Receipt	f Employer lealth For: limary General ther (specify) General	-	n President, Organizational De e Year-to-Date ▼ 250.00	ev l
SUBTOTA	AL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	Ly not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	ic name and acc	areas or any pointed committee to	Solidi Contributions from Such Committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Barbara Hostetler			Date of Receipt
Mailing Address 12844 Military Road	South		12 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16176196
<u>Tukwila</u>	WA	98168-3045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Regional Hospital for Res-	Occupation	n	┥
Regional Hospifal for Res- piratory and	Administ		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		250.00	1
Other (specify)		250.00]
Full Name (Last, First, Middle Initial) Ms. Mariel S Kagan, , R.N., MS			Date of Receipt
Mailing Address 2520 Cherry Avenue			1 2 1 1 2 0 0 8
City	State	Zip Code	Transaction ID: 16176197
Bremerton	WA	98310-4229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Harrison Medical Center	Occupation Vice Pres	n sident and Legal Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joseph M Kortum			Date of Receipt
Mailing Address P O Box 1600			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16176198
Vancouver	WA	98668-1600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Southwest Washington Medi- cal Center	Occupation Presiden	n t and Chief Executive Office	7
Receipt For:	Aggregate	Year-to-Date V	7
Primary General Other (specify) ▼		250.00	

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 232 (check only one) X
Ar	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠	Full Name (Last, First, Middle Initial) Mr. Skip Kriz Mailing Address 3370 Lakeview Drive			Date of Receipt 1 2 1 1 2 2 0 0 8
	City	State OR	Zip Code	Transaction ID: 16176200
	Eugene FEC ID number of contributing federal political committee.	C	97408-7207	Amount of Each Receipt this Period 250.00
	Name of Employer PeaceHealth Receipt For: Primary Other (specify) ▼		n nancial Officer e Year-to-Date ▼ 250.00	_ _ 1
 3.	Full Name (Last, First, Middle Initial) Mr. Thomas Kruse Mailing Address 6860 NW RAnger Way	0 0		Date of Receipt 1 2 1 1 2 0 0 8
	City	State	Zip Code	Transaction ID: 16176201
	Silverdale	WA	98383-6306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Harrison Medical Center	Occupatio Vice Pres		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. James Leonard			Date of Receipt
	Mailing Address 413 Lilly Road NE			12 11 2008
	City	State	Zip Code	Transaction ID: 16176202
	Olympia	WA	98506-5166	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Providence St. Peter Hosp- ital	Occupatio Administ	rator	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	UBTOTAL of Receipts This Page (optional)			750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ai or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
٠.	Full Name (Last, First, Middle Initial) Mr. Chuck Lytle		Date of Receipt
	Mailing Address 747 Broadway Avenu		12 11 2008
	City Seattle	State Zip Code WA 98122-4379	Transaction ID: 16176203 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Swedish Health Services	Occupation Administrator	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Mr. Russell M. Myers		Date of Receipt
	Mailing Address 2908 Shelton Avenue		12 11 2008
	City	State Zip Code	Transaction ID: 16176204
	Yakima FEC ID number of contributing federal political committee.	WA 98902-4073	Amount of Each Receipt this Period 250.00
	Name of Employer Yakima Valley Memorial Ho- spital	Occupation Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Andrea Nenzel		Date of Receipt
	Mailing Address 14432 SE Eastgate W	/ay	12 11 2008
	City	State Zip Code WA 98007-6493	Transaction ID: 16176205
	Bellevue FEC ID number of contributing federal political committee.	WA 98007-6493	Amount of Each Receipt this Period 250.00
	Name of Employer PeaceHealth	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
S	SUBTOTAL of Receipts This Page (optional) .		750.00

	EDULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 232 (check only one) X
or for co	rmation copied from such Reports and St mmercial purposes, other than using the E OF COMMITTEE (In Full) erican Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Dr. G	Name (Last, First, Middle Initial) regory D. Sawyer, MD, PhD. ng Address 11503 Sara Loop Road	State	Zip Code	Date of Receipt M
	ma ID number of contributing al political committee.	C	98908	Amount of Each Receipt this Period 250.00
<u>spita</u>	e of Employer na Valley Memorial Ho- lipt For: Primary General Other (specify)		on Organizational Health Willn e Year-to-Date ▼ 250.00	e e
Mr Pr	Name (Last, First, Middle Initial) reston M Simmons ng Address 1321 Colby Avenue			Date of Receipt
	rett ID number of contributing al political committee.	State WA	Zip Code 98201-1665	Transaction ID: 16176207 Amount of Each Receipt this Period 250.00
Provi <u>Cent</u>	e of Employer dence Everett Medical er sipt For: Primary General Other (specify)		n perating Officer e Year-to-Date ▼ 250.00	1
Mr. J	Name (Last, First, Middle Initial) on D Smiley			Date of Receipt
Mailir — City	ng Address Sunnyside Community PO Box 719	Hospital State	Zip Code	1 2 1 1 2 0 0 8 Transaction ID: 16176208
FEC	nyside ID number of contributing al political committee.	WA C	98944	Amount of Each Receipt this Period 250.00
	e of Employer nyside Community Hospi-	Occupation Chief Ex	n ecutive Officer	
	ript For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTO	TAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James Trull Mailing Address 1016 Tacoma Avenue City Sunnyside FEC ID number of contributing federal political committee. Name of Employer Sunnyside Community Hospital Receipt For: Primary General Other (specify)	State Zip Code WA 98944-2263 C Occupation Trustee Aggregate Year-to-Date ▼	Date of Receipt M M D D 2 0 0 8 Transaction ID: 16176209 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Henry Turner Mailing Address 1654 103rd S.E. City Bellevue FEC ID number of contributing federal political committee. Name of Employer Swedish Health Services Receipt For: Primary General Other (specify)	State Zip Code WA 98004-7001 C Occupation Chairman Aggregate Year-to-Date 250.00	Date of Receipt M M D D 2 0 0 8 Transaction ID: 16176210 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. John Wallen Mailing Address 2520 Cherry Avenue City Bremerton FEC ID number of contributing federal political committee. Name of Employer Harrison Medical Center Receipt For: Primary General Other (specify)	State Zip Code WA 98310-4229 C Occupation CEO Aggregate Year-to-Date 250.00	Date of Receipt 1 2 1 1 2 2 0 0 8 Transaction ID: 16176211 Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 232 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Kim Williams Mailing Address 2815 Kayak View Pla City Camano Island FEC ID number of contributing federal political committee. Name of Employer Providence Everett Medical Center Receipt For:	Ce State Zip Code WA 98282-5022 C Occupation Interim CNE Aggregate Year-to-Date ▼	Date of Receipt M M M
Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Rand J Wortman Mailing Address 888 Swift Boulevard	250.00	Date of Receipt
City Richland	State Zip Code WA 99352-3542	Transaction ID: 16176213 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Kadlec Medical Center	Occupation President and Chief Executive Office	250.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Elaine Couture	1	Date of Receipt
Mailing Address 101 West Eighth Ave	nue State Zip Code	12 11 2008
Spokane Spokane	WA 99204-2307	Transaction ID: 16176214 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Sacred Heart Medical Cent- er	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)		800.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee to	oon for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Ms. Florence Chang		Date of Receipt
	Mailing Address 315 Martin Luther King	Jr Way	12 11 2008
	City Tacoma	State Zip Code WA 98405-4234	Transaction ID: 16176215
	FEC ID number of contributing federal political committee.	C 30405-4234	Amount of Each Receipt this Period 325.00
	Name of Employer MultiCare Health System	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	Full Name (Last, First, Middle Initial) Mr. Gregg A Davidson		Date of Receipt
	Mailing Address P O Box 1376		12 11 2008
	City Mount Vernon	State Zip Code WA 98273-1376	Transaction ID: 16176216
	FEC ID number of contributing federal political committee.	WA 98273-1376	Amount of Each Receipt this Period 350.00
	Name of Employer Skagit Valley Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
_	Full Name (Last, First, Middle Initial) Mr. Ronald O'Halloran		Date of Receipt
	Mailing Address 36 Klondike Road		12 11 2008
	City	State Zip Code	Transaction ID: 16176217
	Republic FEC ID number of contributing federal political committee.	WA 99166-9701	Amount of Each Receipt this Period 350.00
	Name of Employer Ferry County Memorial Hospital	Occupation Administrator	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Γ	SUBTOTAL of Receipts This Page (optional)		1025.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A 0	ny information copied from such Reports and Strong commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. John R White			Date of Receipt
	Mailing Address 801 East Wheeler Ro	ad		12 / 11 / 2008
	City Moses Lake	State WA	Zip Code 98837-1820	Transaction ID: 16176218 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	350.00
	Name of Employer Samaritan Healthcare	Occupatio Presiden	n t and Chief Executive Office	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr. Scott E. Armstrong	-		Date of Receipt
	Mailing Address 3855 44th Avenue NE			12 11 2008
	City Seattle	State WA	Zip Code 98105-5448	Transaction ID: 16176219
	FEC ID number of contributing federal political committee.	C	90103-3440	Amount of Each Receipt this Period 500.00
	Name of Employer Group Health Eastside Hos- pital	Occupatio Executive	n e Vice President	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
. –	Full Name (Last, First, Middle Initial) Mr. David T. Brooks			Date of Receipt
	Mailing Address 1321 Colby Avenue			12 11 2008
	City	State	Zip Code	Transaction ID: 16176228
	Everett FEC ID number of contributing federal political committee.	C	98201-1600	Amount of Each Receipt this Period 500.00
	Name of Employer Providence Health System/- NWSA	Occupatio CEO	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .	1		1350.00

Washington State Hospital Association	State Zip Code WA 98119-4198 C Occupation Executive Vice President Aggregate Year-to-Date 500.00	Date of Receipt Date of Receipt
American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Victoria S. Galanti Mailing Address 300 Elliott Avenue W. Ste. 300 City Seattle FEC ID number of contributing federal political committee. Name of Employer Washington State Hospital Association	WA 98119-4198 C Occupation Executive Vice President Aggregate Year-to-Date ▼ 500.00	Transaction ID: 16176229 Amount of Each Receipt this Period
Ms. Victoria S. Galanti Mailing Address 300 Elliott Avenue W. Ste. 300 City Seattle FEC ID number of contributing federal political committee. Name of Employer Washington State Hospital Association	WA 98119-4198 C Occupation Executive Vice President Aggregate Year-to-Date ▼ 500.00	Transaction ID: 16176229 Amount of Each Receipt this Period
Ste. 300 City Seattle FEC ID number of contributing federal political committee. Name of Employer Washington State Hospital Association	WA 98119-4198 C Occupation Executive Vice President Aggregate Year-to-Date ▼ 500.00	Transaction ID: 16176229 Amount of Each Receipt this Period
Seattle FEC ID number of contributing federal political committee. Name of Employer Washington State Hospital Association	WA 98119-4198 C Occupation Executive Vice President Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Washington State Hospital Association	Occupation Executive Vice President Aggregate Year-to-Date 500.00	
federal political committee. Name of Employer Washington State Hospital Association	Occupation Executive Vice President Aggregate Year-to-Date ▼ 500.00	500.00
Association	Executive Vice President Aggregate Year-to-Date ▼ 500.00	
Association	Aggregate Year-to-Date ▼ 500.00	
rteceipt r or.	500.00	
Primary General		
Other (specify) ▼		
Full Name (Last, First, Middle Initial) Dr. Rodney F Hochman, , M.D.		Date of Receipt
Mailing Address 747 Broadway Avenue		12 11 2008
City	State Zip Code	Transaction ID: 16176230
<u>Seattle</u>	WA 98122-4379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Swedish Health Services	Occupation President and Chief Executive Officer	
	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr Calvin K Knight		Date of Receipt
Mailing Address 747 Broadway Avenue		12 11 2008
City	State Zip Code	Transaction ID: 16176231
Seattle	WA 98122-4307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Swodich Hoolth Sonions	Occupation Chief Operating Officer	
	Aggregate Year-to-Date ▼	
Primary General	500.00	
Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional)	·····	1500.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pers ne name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Marcel C Loh		Date of Receipt
Mailing Address 500 17th Avenue		12 11 2008
City Seattle	State Zip Code WA 98124-5711	Transaction ID: 16176232 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30124 3111	500.00
Name of Employer Swedish Medical Center-Cherry Hill Cam Receipt For: Primary General	Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Peter Morgan Mailing Address 2700 125nd Avenue		Date of Receipt
		12 11 2008
City Redmond	State Zip Code WA 98052	Transaction ID: 16176233 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Group Health Eastside Hos- pital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John T Evans, , Jr.		Date of Receipt
Mailing Address P O Box 1887		12 11 2008
City	State Zip Code	Transaction ID: 16176234
Wenatchee FEC ID number of contributing	WA 98807-1887	Amount of Each Receipt this Period 520.00
Name of Employer Central Washington Hospit-	Occupation President and Chief Executive Office	or .
al Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	
SUBTOTAL of Receipts This Page (optional)		1520.00

	OULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 232 (check only one) X
or for com	nation copied from such Reports and S mercial purposes, other than using the OF COMMITTEE (In Full) ican Hospital Association PAC	Statements mage name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Na	ame (Last, First, Middle Initial) ry V Peck I Address 3312 Watts Lake Road	d		Date of Receipt
City <u>Valle</u> y	l.	State WA	Zip Code 99181-9777	Transaction ID: 16176235 Amount of Each Receipt this Period
	O number of contributing political committee.	C		750.00
St. Jos Receip	of Employer seph Hospital of For: Primary General Other (specify)		n Administrator e Year-to-Date ▼ 750.00	
Mr. C.	ame (Last, First, Middle Initial) Scott Bond Address 914 South Scheuber F	Road		Date of Receipt 1 2 1 1 2 2 0 0 8
City		State	Zip Code	Transaction ID: 16176241
<u>Centr</u>	alia	WA	98531-9027	Amount of Each Receipt this Period
	number of contributing political committee.	C		500.00
Provide <u>ital</u>	of Employer ence St. Peter Hosp-	Occupatio CEO		
	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00	
	ame (Last, First, Middle Initial) ry L. Bebow, , FACHE			Date of Receipt
	Address 914 Eagle Mountain B	lvd		12 15 2008
City <u>Bates</u>	villa	State AR	Zip Code 72501-4218	Transaction ID: 16176273
FEC II	O number of contributing political committee.	C	12301-4210	Amount of Each Receipt this Period 227.50
·	of Employer River Medical Center	Occupatio Administ	n rator and Chief Executive O	ffi
	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 227.50	
SUBTOT	AL of Receipts This Page (optional)			1477.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 232 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	I y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Roger M. Busfield Mailing Address 419 Natural Resou	rces Dr		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Little Rock</u> FEC ID number of contributing federal political committee.	State AR	Zip Code 72205-1576	Transaction ID: 16176276 Amount of Each Receipt this Period 325.00
Name of Employer Arkansas Hospital Association Receipt For: Primary General Other (specify)		n t Emeritus e Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Bob S. Ellzey, FACHE Mailing Address 311 North Morrow	Street		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 16176304
Mena FEC ID number of contributing federal political committee.	AR C	71953-2516	Amount of Each Receipt this Period 227.50
Name of Employer Mena Regional Health System Receipt For: Primary General Other (specify) ▼	Occupation Presiden Aggregate]
Full Name (Last, First, Middle Initial) Mr. James L. Magee			Date of Receipt
Mailing Address 1206 Gordon Duck	worth Drive		12 15 2008
City Piggott	State AR	Zip Code 72454-1911	Transaction ID: 16176320 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		227.50
Name of Employer Piggott Community Hospital	'	e Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 227.50	
SUBTOTAL of Receipts This Page (optional	al)		780.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Ai or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Ray Kordsmeier Mailing Address 1023 Oak St. City Conway FEC ID number of contributing federal political committee.	State Zip Code AR 72032-4354	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Conway Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 227.50	
	Full Name (Last, First, Middle Initial) Mary Franco Mailing Address 684 Valley Rd		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 16176459
	New Canaan	CT 06840-3335	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Norwalk Hospital	Occupation VP Public Affairs	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	Full Name (Last, First, Middle Initial) David Schultz		Date of Receipt
	Mailing Address 1035 116th Avenue N	ortheast	1 2 1 1 2 0 0 8
	City	State Zip Code	Transaction ID: 16176470
	Bellevue	WA 98004-4604	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	250.00
	Name of Employer Overlake Hospital Medical Center	Occupation COO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		727.50

	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 232 (check only one) X
or for commerc	copied from such Reports and Si ial purposes, other than using the COMMITTEE (In Full) Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Barbara Wat	_ast, First, Middle Initial) anabe ress 1717 South J Street			Date of Receipt 1 2 1 1 2 0 0 8
City <u>Tacoma</u>		State WA	Zip Code 98405-4933	Transaction ID: 16176481 Amount of Each Receipt this Period
	nber of contributing cal committee.	C		250.00
Receipt For		Occupation Board Maggregate		
Mr. Timothy	Last, First, Middle Initial) J Goldfarb ress 1600 SW Archer Road			Date of Receipt
City		State	Zip Code	Transaction ID: 16176490
	e nber of contributing cal committee.	FL C	32610-3003	Amount of Each Receipt this Period 1000.00
Name of Em Shands Hea	nployer althCare	Occupatio Chief Ex	n ecutive Officer	
Receipt For: Prima Other			e Year-to-Date ▼ 1000.00	
Full Name (I	_ast, First, Middle Initial) Owen			Date of Receipt
Mailing Add		rt		1 2 1 6 2 0 0 8
City		State	Zip Code	Transaction ID: 16176492
	nber of contributing cal committee.	FL C	32712-2513	Amount of Each Receipt this Period 250.00
Name of Em Florida Hos	iployer Dital	Occupatio Chief Op	n perating Officer	
Receipt For: Prima Other			e Year-to-Date ▼ 250.00	
SUBTOTAL o	f Receipts This Page (optional)			1500.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or fo	information copied from such Reports and St or commercial purposes, other than using the	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	IAME OF COMMITTEE (In Full) American Hospital Association PAC			
4. <u>N</u>	full Name (Last, First, Middle Initial) Mr. Zeff Ross Mailing Address 703 North Flamingo Ro			Date of Receipt
- IV	Mailing Address 703 North Flamingo Ro	oad 		12 16 2008
	Dity	State	Zip Code	Transaction ID: 16176495
_	Pembroke Pines	FL	33028-1006	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	С		1000.00
_	Jame of Employer Jemorial Hospital West	Occupatio Senior V	n ice President, Operations	
F	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	Full Name (Last, First, Middle Initial) Mr. Joe Johnson			Date of Receipt
N	Mailing Address 1055 Saxon Boulevard			12 16 2008
	Dity	State	Zip Code	Transaction ID: 16176496
_	Orange City	FL	32763-8468	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		500.00
N F <u>0</u>	lame of Employer Florida Hospital Fish Mem- rial	Occupatio Presiden	n t and Chief Executive Office	r
F	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Mr. Timothy P Menton			Date of Receipt
_	Mailing Address 2291 SW 76th Lane			12 16 2008
	Dist	State	Zip Code	Transaction ID: 16176498
_	Ocala	FL	34476-6774	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		250.00
\ <u>l</u> ,	lame of Employer /illages Regional Hospita- . The	Occupatio Chief Exc	n ecutive Officer	
F	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		250.00	
SUI	BTOTAL of Receipts This Page (optional)			1750.00
	TAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 232 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers ne name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Paul Betz, , FACHE		Date of Receipt
Mailing Address 3024 Stadium Boule	vard	12 15 2008
City	State Zip Code	Transaction ID: 16176500
Jonesboro	AR 72401-7493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer NEA Baptist Memorial Hosp- ital	Occupation CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	227.50]
Full Name (Last, First, Middle Initial) Mr. Darren Caldwell		Date of Receipt
Mailing Address P O Box 32		12 15 2008
City	State Zip Code	Transaction ID: 16176501
De Witt	AR 72042-0032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.00
Name of Employer DeWitt Hospital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	227.50	
Full Name (Last, First, Middle Initial) Mr. Terry Shaw		Date of Receipt
Mailing Address 111 North Orlando A	venue	12 16 2008
City	State Zip Code	Transaction ID: 16176518
Fort Worth	FL 32789-3675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Adventist Health System Sunbelt Health	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00]
		630.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC		y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John R Harding Mailing Address 7050 Gall Boulevard City	d State	Zip Code	Date of Receipt 1 2 1 6 2 0 0 8 Transaction ID: 16176523
Zephyrhills FEC ID number of contributing federal political committee.	FL C	33541-1347	Amount of Each Receipt this Period 200.00
Name of Employer Florida Hospital Zephyrhi- Ils Receipt For: Primary General Other (specify) ▼		on It and Chief Executive Officer e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Bruce J. Rueben Mailing Address 306 East College Av	/enue		Date of Receipt 1 2 1 6 2 0 0 8
City	State	Zip Code	Transaction ID: 16176525
Tallahassee	FL	32301-1522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Florida Hospital Associat- ion	Occupatio Presiden	t	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1003.52]
Full Name (Last, First, Middle Initial) Ms. Frances Margolin			Date of Receipt
Mailing Address One North Franklin			12 05 2008
City	State	Zip Code	Transaction ID: 16176552
Chicago FEC ID number of contributing federal political committee.	C	60606-3436	Amount of Each Receipt this Period 20.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For:		sident, Operations HRET	
Primary General Other (specify) ▼	33.3346	500.00]
SUBTOTAL of Receipts This Page (optional)		720.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 232 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pers le name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner Mailing Address 11004 Petersborough	n Drive	Date of Receipt 1 2 0 5 2 0 0 8
City	State Zip Code	Transaction ID: 16176554
Rockville	MD 20852-3249	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary Other (specify) ▼	Occupation Director, Grassroots Advocacy Aggregate Year-to-Date ▼ 975.00	1
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain	n Boad	Date of Receipt
		12 12 2008
City	State Zip Code	Transaction ID: 16176989
New Hope FEC ID number of contributing federal political committee.	PA 18938-5760	Amount of Each Receipt this Period 25.42
Name of Employer New Jersey Hospital Assoc- jation	Occupation Sr. VP., Health Economics	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.03	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr	_L	Date of Receipt
Mailing Address 2378 Orchard Crest I	Blvd.	12 12 2008
City	State Zip Code	Transaction ID: 16177000
Manasquan	NJ 08736-4001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Information Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)	······	69.42

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person he name and address of any political committee to s	for the purpose of soliciting contributions colicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Roa City Langhorne FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary Other (specify)	State Zip Code PA 19047-2306 C Occupation Vice President, Human Resources Aggregate Year-to-Date 240.00	Date of Receipt 12 12 2008 Transaction ID: 16177003 Amount of Each Receipt this Period 5.00
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane City Livingston FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NJ 07039-2750 C Occupation Vice President Continuing Care Service Aggregate Year-to-Date 230.00	Date of Receipt 12 12 2008 Transaction ID: 16177007 Amount of Each Receipt this Period 5.00
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Aver City Pennington FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NJ 08534-2302 C Occupation General Counsel Aggregate Year-to-Date 300.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	15.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any per- e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr. Mailing Address 4 Poppy Lane City Howell FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For:	State Zip Code NJ 07731-1451 C Occupation VP Health Economics Aggregate Year-to-Date ▼	Date of Receipt 1 2 1 2 2 0 0 8 Transaction ID: 16177042 Amount of Each Receipt this Period 5.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Valerie Sellers Mailing Address 82 Millers Grove Road	240.00	Date of Receipt
City	State Zip Code	1 2 1 2 2 0 0 8 Transaction ID: 16177043
Belle Mead FEC ID number of contributing federal political committee.	NJ 08502-4306	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior V.P., Health Planning & Research Aggregate Year-to-Date 360.00	earc
Full Name (Last, First, Middle Initial) Mr. Steven J. Summer	1	Date of Receipt
Mailing Address 7335 East Orchard Ro Suite 100	oad	12 17 2008
City Greenwood Village	State Zip Code CO 80111-2582	Transaction ID: 16177075 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Colorado Hospital Associa- tion	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional) .	1	110.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Thomas O. Barnes Mailing Address 1900 Perkins St.		Date of Receipt
City Bristol FEC ID number of contributing	State Zip Code CT 06010-8924	Transaction ID: 16177088 Amount of Each Receipt this Period
rederal political committee. Name of Employer Bristol Hospital Receipt For: Primary General	C Occupation Chairman of the Board Aggregate Year-to-Date ▼	500.00
Full Name (Last, First, Middle Initial) Mr. John Hanshaw Mailing Address 1200 East 3900 Sou	500.00 uth	Date of Receipt 1 2 1 7 2 0 0 8
City Salt Lake City FEC ID number of contributing federal political committee.	State Zip Code UT 84124-1390 C	Amount of Each Receipt this Period 1000.00
Name of Employer HCA - Mountain Division Receipt For: Primary General Other (specify)	Occupation President Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Mr. James Butler, III Mailing Address 1476 Stonegate Lar	le le	Date of Receipt
City East Lansing	State Zip Code MI 48823-2172	Transaction ID: 16178329 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Sparrow Hospital	Occupation	350.00
Receipt For: Primary General Other (specify)	Vice Chairman Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr John A DiAngelo Mailing Address 105 Pancoast Place City Mullica Hill FEC ID number of contributing federal political committee. Name of Employer South Jersey Healthcare Receipt For: Primary General	State Zip Code NJ 08062-4735 C Occupation Senior Vice President Finance and C Aggregate Year-to-Date	Date of Receipt M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Marc H Lory Mailing Address 20 Farmingham Road City Ocean	State Zip Code NJ 07712-7920	Date of Receipt Mark Mark Mark Mark Mark Mark Mark Mark
FEC ID number of contributing federal political committee. Name of Employer Meridian Health Receipt For: Primary General Other (specify)	Occupation Chief Operating Officer Aggregate Year-to-Date 250.00	250.00
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Avenu City Pennington	State Zip Code NJ 08534-2302	Date of Receipt M M
FEC ID number of contributing federal political committee.	C Occupation	70.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	General Counsel Aggregate Year-to-Date ▼ 370.00	
SUBTOTAL of Receipts This Page (optional)		570.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 232 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David P. Lavins Mailing Address 10 Fox Chase Road City Malvern FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Assoc-	State Zip Code PA 19355-3441 C Occupation Chief Financial Officer	Date of Receipt 1 2 1 9 2 0 0 8 Transaction ID: 16178342 Amount of Each Receipt this Period 370.00
iation Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	
Full Name (Last, First, Middle Initial) Mr. John E. Graydon Mailing Address 93 Matlack Drive		Date of Receipt 1 2 1 9 2 0 0 8
City	State Zip Code	Transaction ID: 16178343
Voorhees FEC ID number of contributing federal political committee.	NJ 08043-4723	Amount of Each Receipt this Period 500.00
Name of Employer Virtua Health	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein		Date of Receipt
Mailing Address 27 Harvest Lane		1 2 1 9 2 0 0 8
City	State Zip Code	Transaction ID: 16178345
Livingston	NJ 07039-2750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President Continuing Care Serv	ice
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional) .		880.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Linda A Savino Mailing Address 13 Telegraph Hill City Holmdel FEC ID number of contributing federal political committee.	State Zip Code NJ 07733-1465 C Occupation	Date of Receipt 1 2 1 9 2 0 0 8 Transaction ID: 16178347 Amount of Each Receipt this Period 500.00
Name of Employer Rehabilitation Hospital of Tinton Fall Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Susan Bichel Mailing Address 701 Grove Road		Date of Receipt 1 2 1 8 2 0 0 8
City Greenville FEC ID number of contributing federal political committee.	State Zip Code SC 29605-4211	Transaction ID: 16179031 Amount of Each Receipt this Period 250.00
Name of Employer Greenville Hospital System Receipt For: Primary General Other (specify) ▼	Occupation Vice President Financial Services Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Joe Blake Mailing Address 209 Babbs Holw		Date of Receipt 1 2 1 8 2 0 0 8
City Greenville	State Zip Code SC 29607-3747	Transaction ID: 16179032 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Greenville Hospital System	Occupation VP of Level Affairs	250.00
Receipt For: Primary General Other (specify) ▼	VP of Legal Affairs Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 232 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA	С		
Full Name (Last, First, Middle Initial) Mr. Douglas Bowling			Date of Receipt
Mailing Address 2509 Watercrest La	ane		1 2 1 8 2 0 0 8
City Johns Island	State SC	Zip Code	Transaction ID: 16179033
FEC ID number of contributing federal political committee.	C	29455-3108	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupation Vice Pres	n sident of System Developme	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Hughlyn Burgess			Date of Receipt
Mailing Address 4011 Brackenberry	Drive		12 18 2008
City Anderson	State SC	Zip Code 29621-3565	Transaction ID: 16179034 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	23021 0300	250.00
Name of Employer AnMed Health	Occupation Trustee	n	_
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Allen P Carroll			Date of Receipt
Mailing Address 2095 Henry Teckle	nburg Drive		12 18 2008
City	State	Zip Code	Transaction ID: 16179035
Charleston FEC ID number of contributing federal political committee.	SC	29414-5733	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupation Administ		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	- I		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any persor ne name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Howell Clyborne		Date of Receipt
Mailing Address 701 Grove Road City	State Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179042
Greenville	SC 29605-4211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Greenville Hospital System	Occupation Vice President Community and Gover	nmen
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jay Cox		Date of Receipt
Mailing Address 129 North Washingto		12 18 YYYY 2008
City	State Zip Code	Transaction ID: 16179043
Sumter	SC 29150-4983	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Tuomey Healthcare System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Wallace J Davies		Date of Receipt
Mailing Address 800 North Fant Stree	-	12 18 2008
City	State Zip Code	Transaction ID: 16179044
Anderson FEC ID number of contributing federal political committee.	SC 29621-5708	Amount of Each Receipt this Period 500.00
Name of Employer AnMed Health	Occupation Medical Director/Emergency Services	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1300.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Gene Dickerson, , M.D. Mailing Address 129 North Washing City	ton Street State Zip Code	Date of Receipt M
<u>Sumter</u>	SC 29150-4983	Transaction ID: 16179045 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Tuomey Healthcare System Receipt For: Primary General Other (specify) ▼	Occupation Vice President of Medical Affairs Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Douglas Dorman Mailing Address 701 Grove Road		Date of Receipt
City	State Zip Code	Transaction ID: 16179046
Greenville	SC 29605-5611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Greenville Hospital System	Occupation VP Human Resources & Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. J Larry Dozier, , Jr., FAC		Date of Receipt
Mailing Address P O Box 620		1 2 1 8 2 0 0 8
City	State Zip Code	Transaction ID: 16179048
Winnsboro	SC 29180-0620	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Palmetto Health	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Descripts This Days (autisms	l)	750.00

		FOR LINE NUMBER: PAGE 114 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms Doran Dunaway Mailing Address 701 Grove Road		Date of Receipt
City	State Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179049
Greenville	SC 29605-4211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Greenville Hospital System	Occupation Vice President Information and Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David L. Dunlap, FACHE		Date of Receipt
Mailing Address 125 Doughty Street Suite 760		12 18 2008
City	State Zip Code	Transaction ID: 16179050
Charleston	SC 29403-5736	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Roper Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Rev Terence K Fleming		Date of Receipt
Mailing Address PO Box 357		12
City	State Zip Code	Transaction ID: 16179054
Folly Beach	SC 29439-0357	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation VP for Mission	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 232 (check only one) X
Any information copied from such Reports or for commercial purposes, other than use NAME OF COMMITTEE (In Full) American Hospital Association F	and Statements may not be sold or used by any persoing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms Lisa M Goodlett Mailing Address 3000 St Matthew	s Road	Date of Receipt
City Orangeburg	State Zip Code SC 29118-1442	Transaction ID: 16179055 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Regional Medical Center of Orangeburg Receipt For: Primary General Other (specify) ▼	Occupation Vice President Finance Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Doug Harrison Mailing Address 1574 Fiddlers Mailing Address	arsh Drive	Date of Receipt 1 2 1 8 2 0 0 8
City	State Zip Code	Transaction ID: 16179056
Mt Pleasant	SC 29464-4286	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Roper Hospital	Occupation Vice President, Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Lisa Irvin		Date of Receipt
Mailing Address 159 Harbour Wa	tch Way	12 18 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179057
Mount Pleasant FEC ID number of contributing federal political committee.	SC 29464-2827	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupation VP of Nursing	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	onal)	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Mr. Malcolm W Isley			Date of Receipt
Mailing Address 109 Anna's Place			12 18 2008
City Simpsonville	State SC	Zip Code 29681-4813	Transaction ID: 16179058
FEC ID number of contributing federal political committee.	C	29001-4013	Amount of Each Receipt this Period 250.00
Name of Employer Greenville Hospital System	Occupatio Vice Pres		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Ellen Jackson			Date of Receipt
Mailing Address 316 Calhoun Street			12 18 2008
City Charleston	State SC	Zip Code	Transaction ID: 16179063
FEC ID number of contributing federal political committee.	C	29401-1113	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupatio VP Man	n aged Care & Physician Serv	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Bret Johnson			Date of Receipt
Mailing Address 316 Calhoun Street			12 18 2008
City Charleston	State SC	Zip Code 29401-1113	Transaction ID: 16179064
FEC ID number of contributing federal political committee.	C	29401-1113	Amount of Each Receipt this Period 250.00
Name of Employer Roper Hospital	Occupatio Chief Fin	n ancial Officer	
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona))		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Edmond R. Jordan Mailing Address 201 Graylyn Drive		Date of Receipt
City	State Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179065
Anderson FEC ID number of contributing	SC 29621-1985	Amount of Each Receipt this Period
federal political committee.	C	500.00
Name of Employer AnMed Health Medical Cent- er	Occupation Director of Urgent Care	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr Fred L Latham Mailing Address 1205 Spring Street		Date of Receipt
Mailing Address 1325 Spring Street		12 18 2008
City Greenwood	State Zip Code SC 29646-3860	Transaction ID: 16179066
FEC ID number of contributing federal political committee.	C 29040-3000	Amount of Each Receipt this Period 250.00
Name of Employer Self Regional Healthcare	Occupation Executive Vice President and Chief O	D e
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John A Miller, , Jr., FAC		Date of Receipt
Mailing Address 1205 Briarwood Ave.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Anderson	State Zip Code SC 29621-3931	Transaction ID: 16179067 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer AnMed Health Medical Cent- er	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (optional) .		1500.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 232 (check only one) X 11a
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full) American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to an PAC	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial Mr. Michael C. Riordan Mailing Address 4 White Cresc	ent Lane	Date of Receipt 1 2 1 8 2 0 0 8
City	State Zip Code	Transaction ID: 16179069
Simpsonville FEC ID number of contributing federal political committee.	SC 29681-3614	Amount of Each Receipt this Period 500.00
Name of Employer Greenville Hospital System Receipt For: Primary General Other (specify) ▼	Occupation President and CEO Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial Ms. Jeanne L Ward Mailing Address 298 Memorial		Date of Receipt
City	State Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179070
Seneca	SC 29672-9499	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Oconee Memorial Hospital	Occupation President and Chief Executive Officer	 r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial Mr. Charles D Beaman, , Jr. Mailing Address P O Box 2266		Date of Receipt
		12 18 2008
City	State Zip Code	Transaction ID: 16179071
Columbia FEC ID number of contributing federal political committee.	SC 29202-2266	Amount of Each Receipt this Period 500.00
Name of Employer Palmetto Health	Occupation President and Chief Executive Officer	- r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (c	ptional)	1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Philip A Clayton			Date of Receipt
Mailing Address PO Box 829 City	State	Zip Code	1 2 1 8 2 0 0 8 Transaction ID: 16179072
Conway	SC	29528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Conway Medical Center	Occupatio Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Richard E D'Alberto, , FACHE			Date of Receipt
Mailing Address P O Box 976			12 18 2008
City	State	Zip Code	Transaction ID: 16179073
Clinton	SC	29325-0976	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Laurens County Healthcare System		ecutive Officer	
Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Thomas C Dandridge			Date of Receipt
Mailing Address 3000 St Matthews F	Road		12 18 2008
City	State	Zip Code	Transaction ID: 16179074
Orangeburg	SC	29118-1442	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Regional Medical Center of Orangeburg	Occupatio Presiden	t	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	`		2000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard Foster, MD Mailing Address 1000 Center Point I	Road	Date of Receipt
City Columbia	State Zip Code SC 29210-5802	Transaction ID: 16179075 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.37
Name of Employer South Carolina Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Sr. Vice President Aggregate Year-to-Date 365.37	
Full Name (Last, First, Middle Initial) Mr. W. Ham Hudson Mailing Address 298 Memorial Drive		Date of Receipt 1 2 1 8 2 0 0 8
City	State Zip Code	Transaction ID: 16179076
Seneca	SC 29672-9499	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Laurens County Healthcare System	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. J. Thornton Kirby		Date of Receipt
Mailing Address 1000 Center Point I	Road	12 18 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179077
Columbia FEC ID number of contributing federal political committee.	SC 29210-5802	Amount of Each Receipt this Period 730.74
Name of Employer South Carolina Hospital Association	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 730.74	
	l)	1596.11

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAGE	nd Statements may not be sold or used by any person the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Valinda Rutledge Mailing Address One St Francis Driv City	/e State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Greenville	SC 29601-3207	Transaction ID: 16179078 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Bon Secours St. Francis Health System Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Stuart Smith Mailing Address 169 Ashley Avenue		Date of Receipt
City	State Zip Code	12 18 2008 Transaction ID: 16179079
Charleston	SC 29425-8905	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer MUSC Medical Center of Medical Univers Receipt For: Primary General	Occupation Vice President Clinical Operations and Aggregate Year-to-Date	
Other (specify)	1000.00	
Full Name (Last, First, Middle Initial) Ms. Patti Smoake		Date of Receipt
Mailing Address 1000 Center Point	Road	12 18 2008
City	State Zip Code	Transaction ID: 16179080
Columbia	SC 29210-5802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.37
Name of Employer South Carolina Hospital Association	Occupation VP, Public Relations]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.37	
	ıl)	1865.37

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PA		
Full Name (Last, First, Middle Initial) Mr. Allan Stalvey		Date of Receipt
Mailing Address 900 Gregg Street	7.0.4	12 18 2008
City <u>Columbia</u>	State Zip Code SC 29201-3913	Transaction ID: 16179081 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	950.00
Name of Employer South Carolina Hospital Association	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Mr. Doug White		Date of Receipt
Mailing Address 809 82nd Parkway		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179082
Myrtle Beach FEC ID number of contributing federal political committee.	SC 29572-4611	Amount of Each Receipt this Period 1010.00
Name of Employer Grand Strand Regional Med- ical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1010.00	
Full Name (Last, First, Middle Initial) Mr. John E. Callender		Date of Receipt
Mailing Address 2743 Elginfield Roa	ad	1 2 1 8 2 0 0 8
City	State Zip Code	Transaction ID: 16179093
Upper Arlington FEC ID number of contributing federal political committee.	OH 43220-4247	Amount of Each Receipt this Period 50.00
Name of Employer Ohio Hospital Association	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional	J)	2010.00
	bber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 232 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. David Perse		Date of Receipt
Mailing Address 1730 West 25th Stree	-	12 18 2008
City	State Zip Code	Transaction ID: 16179135
Cleveland FEC ID number of contributing	OH 44113-3108	Amount of Each Receipt this Period 250.00
federal political committee.		250.00
Name of Employer Lutheran Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Janice Murphy	I.	Date of Receipt
Mailing Address 25365 Plainview Cour	t	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179141
Columbia Station	OH 44028-8914	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Fairview Hospital	Occupation Vice President, Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Fred M DeGrandis	I	Date of Receipt
Mailing Address 18101 Lorain Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179155
Cleveland	OH 44111-5612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Fairview Hospital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms Patricia G Ball Mailing Address 2800 North Dallas P Suite 200	arkway	Date of Receipt 1 2 1 8 2 0 0 8
City Plano FEC ID number of contributing federal political committee.	State Zip Code TX 75093-5993	Transaction ID: 16179162 Amount of Each Receipt this Period 1000.00
Name of Employer Legacy Hospital Partners, Inc. Receipt For: Primary General Other (specify) ▼	Occupation SVP of Strategic Dev & Public Affairs Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Michael J. Rock Mailing Address 325 Seventh Street, Suite 700	NW	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179163
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 350.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Sr. Associate Director Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. Thomas P. Nickels Mailing Address 325 Seventh Street	NIM	Date of Receipt
Mailing Address 325 Seventh Street, Suite 700	INVV	12 18 2008
City	State Zip Code DC 20004-2818	Transaction ID: 16179164
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 1000.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Sr. Vice President, Federal Relations Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms Vanessa Purnell Mailing Address 1447 York Road	Olds 7's Olds	Date of Receipt 1 2 1 9 2 0 0 8
City Lutherville	State Zip Code MD 21093-6014	Transaction ID: 16179241
FEC ID number of contributing federal political committee.	MD 21093-6014	Amount of Each Receipt this Period 500.00
Name of Employer MedStar Health Receipt For: Primary General Other (specify) ▼	Occupation Assistant Vice President Governmen Aggregate Year-to-Date 500.00	at A f
Full Name (Last, First, Middle Initial) Mr. Steven S. Cohen Mailing Address 5565 Sterrett Place		Date of Receipt 1 2 1 9 2 0 0 8
Sth Floor City	State Zip Code	Transaction ID: 16179243
Columbia	MD 21044-2665	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer MedStar Health	Occupation Sr. VP, Intergrated Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Matthew Anderson, JD		Date of Receipt
Mailing Address 2550 University Avenu	ie W.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179507
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	144.84
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres, Regulatory/Strategic Affai	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 490.17	
		1144.84

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any peen and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Ann Gibson		Date of Receipt
Mailing Address 2550 University Avenuation Suite 350-S	ue W.	12 19 2008
City	State Zip Code	Transaction ID: 16179511
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer Minnesota Hospital Associ- ation	Occupation Director, Federal Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Amy Harris		Date of Receipt
Mailing Address 631 SE First Street		12 19 2008
City	State Zip Code	Transaction ID: 16179514
Faribault FEC ID number of contributing federal political committee.	MN 55021-6362	Amount of Each Receipt this Period 30.00
Name of Employer Fairview Health Services	Occupation Director of Public Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Mr. Richard Kreyer	<u> </u>	Date of Receipt
Mailing Address 2550 University Avenu	ue W.	1 2 1 9 2 0 0 8
City	State Zip Code	Transaction ID: 16179518
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	98.00
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice President, Labor Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .		188.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Mark Sonneborn Mailing Address 2550 University Aven	ue W.	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16179523
Saint Paul FEC ID number of contributing federal political committee.	MN 55114-1052	Amount of Each Receipt this Period 60.00
Name of Employer Minnesota Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President of Information Services Aggregate Year-to-Date 260.00	5
Full Name (Last, First, Middle Initial) Ms. Peggy Westby Mailing Address 2550 University Aven	ue W.	Date of Receipt
Suite 350-S	State Zip Code	1 2 1 9 2 0 0 8 Transaction ID: 16179524
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	65.22
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.01	
Full Name (Last, First, Middle Initial) Mr. Joseph L Woodin		Date of Receipt
Mailing Address P O Box 10 264 Maple Ridge Lan		12 22 2008
City <u>Sharon</u>	State Zip Code VT 05065-0010	Transaction ID: 16186237 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Gifford Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	····	475.22
TOTAL This Period (last page this line number		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate so for each categor Detailed Summa	of the
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Ms. Beth Berry Mailing Address 500 Interstate Bouleva	10. "	Date of Receipt
			12 22 2008
	City Nashville	State Zip Code TN 37210-4634	Transaction ID: 16189080
	FEC ID number of contributing federal political committee.	C 3/210-4034	Amount of Each Receipt this Period 250.00
	Name of Employer Tennessee Hospital Associ- ation	Occupation Sr. Vice President, Govern	nment Affairs
	Receipt For: Primary General Other (specify) ▼		000.00
. –	Full Name (Last, First, Middle Initial) Mr. Chris Clarke		Date of Receipt
	Mailing Address 500 Interestate Blvd. S	outh	12 22 2008
	City	State Zip Code	Transaction ID: 16189081
	Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 150.00
	Name of Employer Tennessee Hospital Associ- ation	Occupation Senior Vice President, Ce	nter for Pati
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	500.00
_	Full Name (Last, First, Middle Initial) Mr. Michael A. Dietrich		Date of Receipt
	Mailing Address 500 Interstate Bouleva	rd South	12
	City	State Zip Code	Transaction ID: 16189082
	Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 150.00
	Name of Employer Tennessee Hospital Associ- ation	Occupation Assistant Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	500.00
Γ,	SUBTOTAL of Receipts This Page (optional)		550.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 232 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG	<u> </u>	arooo or any ponioca committee to	
Full Name (Last, First, Middle Initial) Mr. James L. Goodloe			Date of Receipt
Mailing Address 500 Interstate Blvd.	. South		12 22 2008
City	State	Zip Code	Transaction ID: 16189083
Nashville FEC ID number of contributing federal political committee.	C	37210-4634	Amount of Each Receipt this Period 250.00
Name of Employer Tennessee Hospital Associ- ation		ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Mr. Michael Huggins			Date of Receipt
Mailing Address 500 Interstate Boul	evard South		1 2 2 2 2 0 0 8
City Nashville	State TN	Zip Code	Transaction ID: 16189084
FEC ID number of contributing federal political committee.	C	37210-4634	Amount of Each Receipt this Period 250.00
Name of Employer Tennessee Hospital Associ-	Occupation	n e Vice President & COO	
ation Receipt For: Primary General Other (specify) ▼	- ' '	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Bill Jolley			Date of Receipt
Mailing Address 500 Interstate Blvd.	., South		1 2 2 2 2 0 0 8
City Nashville	State TN	Zip Code	Transaction ID: 16189085
FEC ID number of contributing federal political committee.	C	37210-4634	Amount of Each Receipt this Period 150.00
Name of Employer Tennessee Hospital Associ- ation	- + +	t Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	.0		650.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contril or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such common programs. Any political committee to solicit contributions from such contributions fr	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 23 (check only one) X 11a 11b 11c 12 13 14 15 16 [
Full Name (Last, First, Middle Initial) Mr. William H Anderson Mailing Address P O Box 610 City State Zip Code Sheffield AL 35660-0610 FEC ID number of contributing federal political committee. Name of Employer Helen Relief Hospital Primary General Other (specify) ▼ City State Zip Code AL 35660-0610 Full Name (Last, First, Middle Initial) Mr. Ronald S Owen Mailing Address P O Box 6987 City State Zip Code AL 36302-6987 City State Zip Code AL 36302-6987 City State Zip Code AL 36302-6987 FEC ID number of contributing federal political committee. Name of Employer Southeast Alabama Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Ronald S Owen Mailing Address Alabama Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City State Zip Code KS 66614-4305 FEC ID number of contributing federal political committee. Name of Employer Karsas Hospital Association Roceipt For: Primary General Occupation Vice President, Government Relations Receipt For: Primary General Occupation Vice President, Government Relations Receipt For: Primary General Occupation Vice President, Government Relations Receipt For: Primary General Occupation Vice President, Government Relations Receipt For: Primary General Occupation Vice President, Government Relations Receipt For: Primary General Occupation Vice President, Government Relations Receipt For: Primary General Occupation Vice President, Government Relations Receipt For: Primary General Occupation Vice President, Government Relations	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may be name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Sheffield AL 35660-0610 FEC ID number of contributing federal political committee. Name of Employer Annual of Each Receipt this I Transaction ID: 16189105 Full Name (Last, First, Middle Initial) Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City State Zip Code Aggregate Year-to-Date ▼ Cocupation Primary General Cocupation Cocupation President Aggregate Year-to-Date ▼ 1000.00 Date of Receipt Transaction ID: 16189092 Amount of Each Receipt this I Cocupation Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Transaction ID: 16189105 Date of Receipt this I Date of Receipt Transaction ID: 16189105 Date of Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Cocupation Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Amount of Each Receipt this I	Full Name (Last, First, Middle Initial) Mr. William H Anderson Mailing Address P O Box 610	State	Zip Code	12 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:	FEC ID number of contributing		35660-0610	Amount of Each Receipt this Period 1000.00
Mr. Ronald S Owen Mailing Address P O Box 6987 City State Zip Code AL 36302-6987 Amount of Each Receipt this I FEC ID number of contributing federal political committee. Name of Employer Southeast Alabama Medical Center Receipt For: Primary General Other (specify) ▼ City State Zip Code Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City State Zip Code Topeka KS 66614-4305 FEC ID number of contributing federal political committee. Name of Employer KS 66614-4305 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association On Receipt For: Primary General Occupation Vice President, Government Relations Aggregate Year-to-Date ▼	Helen Keller Hospital Receipt For: Primary General	Presiden	t e Year-to-Date ▼	
City State Zip Code AL 36302-6987 Amount of Each Receipt this I FEC ID number of contributing federal political committee. Name of Employer Southeast Alabama Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City State Zip Code Transaction ID: 16189092 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189092 Amount of Each Receipt this I Date of Receipt Transaction ID: 16189105 Topeka FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For: Primary General Occupation Vice President, Government Relations Aggregate Year-to-Date ▼	Mr. Ronald S Owen			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Southeast Alabama Medical Center Receipt For: Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City State Zip Code Transaction ID: 16189105 Topeka KS 66614-4305 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For: Primary General Occupation Vice President, Government Relations Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Occupation Vice President, Government Relations Aggregate Year-to-Date ▼	•		•	Transaction ID: 16189092
Center Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Autonoo Full Name (Last, First, Middle Initial) Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City State Zip Code Topeka FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For: Primary General Occupation Vice President, Government Relations Receipt For: Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	FEC ID number of contributing		30002 0007	400.00
Mr. Chad R. Austin Mailing Address 6518 SW 26th Court City State Zip Code Topeka KS 66614-4305 FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Receipt For: Primary General Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Center Receipt For: Primary General	Chief Exe	ecutive Officer Year-to-Date	
City State Zip Code Topeka KS 66614-4305 Amount of Each Receipt this In the state of Contributing federal political committee. Name of Employer Kansas Hospital Association Nice President, Government Relations Receipt For: Primary General State Zip Code KS 66614-4305 Amount of Each Receipt this In the state of Column	Mr. Chad R. Austin			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Kansas Hospital Association Nice President, Government Relations Receipt For: Primary General Aggregate Year-to-Date ▼			•	Transaction ID: 16189105
on	FEC ID number of contributing		00014-4305	Amount of Each Receipt this Period 34.50
	on Receipt For: Primary General	Vice Pres	sident, Government Relation Year-to-Date V	s
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional))	1434.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persor e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Fred J. Lucky		Date of Receipt
Mailing Address 14607 W 89		12 22 2008
City	State Zip Code	Transaction ID: 16189106
<u>Lenexa</u>	KS 66215-2967	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	115.40
Name of Employer Kansas Hospital Associati- on	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.02	_
Full Name (Last, First, Middle Initial) Ms. Melissa Levy Hungerford	<u> </u>	Date of Receipt
Mailing Address 6448 SW Bayshore D	ır	12 22 2008
City	State Zip Code	Transaction ID: 16189108
Auburn	KS 66402-9324	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	57.70
Name of Employer Kansas Hospital Associati- on	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.03	
Full Name (Last, First, Middle Initial) Mr. Robert T. Meling		Date of Receipt
Mailing Address 13005 Catalina Street	t .	12 22 2008
City	State Zip Code	Transaction ID: 16189109
<u>Leawood</u>	KS 66209-2392	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	57.69
Name of Employer Associated Purchasing Ser- vices	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	>	230.79

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A O	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any per name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Thomas L. Bell Mailing Address 4301 NW Valley Road		Date of Receipt
	City Topeka	State Zip Code KS 66618-3445	Transaction ID: 16189113 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	557.70
	Name of Employer Kansas Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) Mr. William M Murray Mailing Address 9801 Renner Boulevard	I, Ste 100	Date of Receipt
	City	State Zip Code	Transaction ID: 16189114
	Lenexa	KS 66219-9745	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	375.00
	Name of Employer Sisters of Charity of Lea- venworth Heal	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 375.00	
_	Full Name (Last, First, Middle Initial) Mr. Steven B. Poage		Date of Receipt
	Mailing Address 3401 SW Alameda		12 22 YYYY 12 22 2008
	City	State Zip Code	Transaction ID: 16189115
	<u>Topeka</u>	KS 66614-5109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Kansas Hospital Associati- on	Occupation Vice President/CFO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		1182.70

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persore name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Warren Tardy		Date of Receipt
Mailing Address 310 25th Avenue Nort Suite 101		12 23 7 2008
City Nashville	State Zip Code TN 37203-1515	Transaction ID: 16193352
FEC ID number of contributing federal political committee.	C 37203-1313	Amount of Each Receipt this Period 300.00
Name of Employer HCA	Occupation Director, Public Policy Management G	arp
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. James C Cooper		Date of Receipt
Mailing Address P O Box 5525		12 29 2008
City	State Zip Code	Transaction ID: 16196000
Bismarck	ND 58506-5525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer MedCenter One	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Kathy A. Bizarro, FACHE		Date of Receipt
Mailing Address 544 Upper Straw Rd		12 29 YYYY 12 29 2008
City	State Zip Code	Transaction ID: 16196085
Hopkinton FEC ID number of contributing federal political committee.	NH 03229-2023	Amount of Each Receipt this Period 150.00
Name of Employer New Hampshire Hospital As- sociation	Occupation Executive Vice President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		700.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 232 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Anne Jamieson Mailing Address One Parkland Drive City	State Zip Code	Date of Receipt 1 2 2 9 2 0 0 8 Transaction ID: 16196086
Derry FEC ID number of contributing federal political committee.	NH 03038-2746	Amount of Each Receipt this Period 350.00
Name of Employer Parkland Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Ms. Nancy R. Willis Mailing Address 900 East Broadway		Date of Receipt 1 2 2 9 2 0 0 8
City	State Zip Code	Transaction ID: 16196102
Bismarck	ND 58501-4520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Alexius Medical Center	Occupation VP of Government Relations & Mark	eting
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Barry G Beeman		Date of Receipt
Mailing Address 17 Belmont Avenue		12 29 2008
City	State Zip Code	Transaction ID: 16196104
Brattleboro FEC ID number of contributing federal political committee.	VT 05301-6613	Amount of Each Receipt this Period 500.00
Name of Employer Brattleboro Memorial Hosp- ital	Occupation President and Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	1	1100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Penny Brooke Mailing Address 36 South State Street		7'- Onda	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Salt Lake City FEC ID number of contributing federal political committee.	State UT	Zip Code 84111-1624	Transaction ID: 16196124 Amount of Each Receipt this Period 350.00
Name of Employer Intermountain Healthcare, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Trustee Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Charles W Sorenson, , Jr., M.D Mailing Address 36 South State Street	et, 22nd Fl		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Salt Lake City	State UT	Zip Code 84111-1453	Transaction ID: 16196126 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Intermountain Healthcare, Inc. Receipt For: Primary General Other (specify) ▼	-, '	ne Vice President and Chief C Year-to-Date ▼ 500.00	<u> </u>
Full Name (Last, First, Middle Initial) Mr. John F. Nicholls Mailing Address 70 Delmont Avenue	•		Date of Receipt
City	State	Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16197618
Barre FEC ID number of contributing federal political committee.	C	05641-3214	Amount of Each Receipt this Period 350.00
Name of Employer Central Vermont Medical Center Receipt For: Primary General Other (specify)	Occupation Trustee Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional))		1200.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Hollie Phillips		Date of Receipt
Mailing Address 237 Kingsway Dr		12 23 2008
City	State Zip Code	Transaction ID: 16198475
Lexington	KY 40502-1642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Appalachian Regional Heal- thcare	Occupation VP Corporate Startegy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Mr. Melvyn Patashnick	I	Date of Receipt
Mailing Address 528 Washington High	way	12 22 2008
City	State Zip Code	Transaction ID: 16198483
Morrisville	VT 05661-8973	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Copley Hospital	Occupation President and Chief Executive Office	er e
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Anthony Caprio	<u> </u>	Date of Receipt
Mailing Address 6 Cottage Lane		12 22 2008
City	State Zip Code	Transaction ID: 16198486
Marlboro	NJ 07746-2123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer CentraState Healthcare Sy- stem	Occupation Chairman	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1	1300.00

SCHEDULE A	•		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 232 (check only one) X
or for commercial purpo	ses, other than using the na	ements may ame and ado	not be sold or used by any perso tress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, Fire Mr. Bill M. Welch Mailing Address 3 City Reno	st, Middle Initial) 352 Corey Drive	State NV	Zip Code 89509-3931	Date of Receipt 12 23 2008 Transaction ID: 16198487
FEC ID number of c	nittee.	C		Amount of Each Receipt this Period 500.00
Name of Employer Nevada Hospital As: on Receipt For: Primary Other (specify	General	President	and Chief Executive Office Year-to-Date ▼ 500.00	r]
Full Name (Last, Fire Mr. Jack Ludmir Mailing Address 8	st, Middle Initial) 00 Spruce Street			Date of Receipt 1 2 2 9 2 0 0 8
City		State	Zip Code	Transaction ID: 16198488
Philadelphia FEC ID number of c federal political com		C	19107-6130	Amount of Each Receipt this Period 350.00
Name of Employer Pennsylvania Hospi	al	Occupation	n ostetrics & Gynecology	
Receipt For: Primary Other (specify	General ▼		Year-to-Date ▼ 350.00	
Full Name (Last, Fire Ms. Eva C. LaBarge	st, Middle Initial)			Date of Receipt
Mailing Address 6	434 Sun Flag Ct.			12 29 2008
City		State	Zip Code	Transaction ID: 16198489
Sparks FEC ID number of c federal political com		C	89436-5400	Amount of Each Receipt this Period 500.00
Name of Employer Nevada Hospital Ass on	sociati-	Occupation Vice Pres	ident of Operations	
Receipt For: Primary Other (specify	General ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receip	ts This Page (optional)			1350.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Alice Ensogna Mailing Address 1909 Wayland Dr City Winchester FEC ID number of contributing federal political committee. Name of Employer Valley Health System Receipt For: Primary General	State Zip Code VA 22601-6217 C Occupation Chief Nursing Officer Aggregate Year-to-Date ▼	Date of Receipt 1 2
Other (specify) Full Name (Last, First, Middle Initial) Mr. Thomas C. Jividen Mailing Address 2713 Greenhill Aver City	state Zip Code	Date of Receipt 1 2 3 0 2 0 0 8
Lynchburg FEC ID number of contributing federal political committee. Name of Employer Centra Health	VA 24503-2923 C Occupation Senior Vice President	Transaction ID: 16208232 Amount of Each Receipt this Period 350.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Xavier Richardson Mailing Address 8121 Lee Jackson C	ircle	Date of Receipt
City Spotsylvania	State Zip Code VA 22553-3819	Transaction ID: 16208256 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Medicorp Health System	Occupation Vice President Corporate Development	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
	1	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 232 (check only one) X
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. George W Dawson Mailing Address 1920 Atherholt Road City Lynchburg FEC ID number of contributing federal political committee. Name of Employer Centra Health Receipt For: Primary General	State Zip Code VA 24501-1104 C Occupation President and Chief Executive Office Aggregate Year-to-Date	Date of Receipt M M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Hank J Porten, , CHE Mailing Address 575 Beech Street	350.00	Date of Receipt 1 2
City	State Zip Code	Transaction ID: 16211595
FEC ID number of contributing federal political committee.	MA 01040-2223	Amount of Each Receipt this Period 350.00
Name of Employer Holyoke Medical Center Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Office Aggregate Year-to-Date 350.00	r
Full Name (Last, First, Middle Initial) Mr. Jon Fishpaw		Date of Receipt
Mailing Address 615 Elsinore Place		12 29 2008
City	State Zip Code	Transaction ID: 16211601
Cincinnati	OH 45202-1459	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Catholic Healthcare Partn- ers	Occupation Corp. Director, Advocacy & Gov't. Re	el.
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		950.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 140 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
<i>A</i>	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be name and address o	sold or used by any person fany political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
4 .	Full Name (Last, First, Middle Initial) Mr. John E. Callender	Date of Receipt		
	Mailing Address 2743 Elginfield Road			12 30 2008
	City Upper Arlington		p Code 3220-4247	Transaction ID: 16211612 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1	550.00
	Name of Employer Ohio Hospital Association	Occupation Senior Vice Pre	esident	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 1000.00	
_ 3.	Full Name (Last, First, Middle Initial) Mr. Michael K Winthrop Mailing Address P O Box 8004			Date of Receipt
	Mailing Address P O Box 8004			12 30 7 2008
	City Bellevue		p Code 4811-8004	Transaction ID: 16211614
	FEC ID number of contributing federal political committee.	C	10004	Amount of Each Receipt this Period 250.00
	Name of Employer Bellevue Hospital	Occupation President		
	Receipt For: Primary General Other (specify)	Aggregate Year-to	o-Date ▼ 250.00	
_ ;.	Full Name (Last, First, Middle Initial) Ms. Kimberly A. Keiser			Date of Receipt
	Mailing Address 2237 Bryden Road			M M / D D / Y Y Y Y Y 1 1 2 3 0 2 0 0 8
	City	'	p Code	Transaction ID: 16211616
	Bexley FEC ID number of contributing federal political committee.	OH 4:	3209-1612	Amount of Each Receipt this Period 250.00
	Name of Employer Ohio Hospital Association	Occupation Chief Informati	on Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t		
	SUBTOTAL of Receipts This Page (optional)			1050.00
	TOTAL This Period (last page this line number		·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Bridget A. Gargan Mailing Address 54 West Weisheimer F City Columbus FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify)	State Zip Code OH 43214-2545 C Occupation Vice President, State Policy & Advoca Aggregate Year-to-Date	Date of Receipt M M J J J J J J J J J J J J J J J J J
Full Name (Last, First, Middle Initial) Ms. Mary M. Yost Mailing Address 924 Riva Ridge Boulev City Gahanna FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify)	State Zip Code OH 43230-3825 C Occupation Vice President, Public Affairs Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley Mailing Address 257 Clouse Lane City Granville FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify)	State Zip Code OH 43023-1428 C Occupation Senior Vice President Aggregate Year-to-Date 500.00	Date of Receipt M M J J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 232 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. James R. Castle		Date of Receipt
	Mailing Address 815 Gatehouse Lane		12 30 7 2008
	City Columbus	State Zip Code OH 43235-1733	Transaction ID: 16211620 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Ohio Hospital Association	Occupation President & Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
- 3.	Full Name (Last, First, Middle Initial) Steven Allen		Date of Receipt
	Mailing Address 4040 Baughman Gran	.t	12 30 4 2008
	City New Albany	State Zip Code OH 43054-8933	Transaction ID: 16211621
	FEC ID number of contributing federal political committee.	C 43034-6933	Amount of Each Receipt this Period 125.00
	Name of Employer Nationwide Children's Hos- pital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Mr. Ronald J Bachman		Date of Receipt
	Mailing Address 1000 McKinley Park D	rive	12 30 YYYYY 12 30 2008
	City Marion	State Zip Code OH 43302-6397	Transaction ID: 16211622 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 45502-0597	250.00
	Name of Employer Marion General Hospital	Occupation President and Chief Executive Office	er
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Г			875.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Lyndon J Christman Mailing Address 203 Bryn Drive	Ctata 7in Code	Date of Receipt 1 2 3 0 2 0 0 8
City Granville	State Zip Code OH 43023-1503	Transaction ID: 16211623 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 45025-1505	337.50
Name of Employer Fayette County Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) Dr. John D. Clough, MD Mailing Address 1760 Carriage Place	ce	Date of Receipt
City	State Zip Code	Transaction ID: 16211624
Gates Mills	OH 44040-9755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Cleveland Clinic Health System	Occupation Director of Health Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. William W. W Harding		Date of Receipt
Mailing Address 1305 Independence	e Circle S.E.	1 2 3 0 Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16211625
New Philadelphia	OH 44663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Union Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	al)	1087.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 232 (check only one) X 11a
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Mr. Stanley R Korducki Mailing Address 950 West Wooster Stre	eet		Date of Receipt
	City Bowling Green	State OH	Zip Code 43402-2603	Transaction ID: 16211626 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Wood County Hospital Receipt For:	Occupation Presiden	t	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) Mr. Kevin C Martin Mailing Address 630 East River Street			Date of Receipt
	City	State	Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16211627
	Elyria FEC ID number of contributing federal political committee.	C	44035-5902	Amount of Each Receipt this Period 500.00
	Name of Employer EMH Regional Medical Cent- er	Occupatio Presiden	n It and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Patrick J Martin			Date of Receipt
	Mailing Address 272 Benedict Avenue			1 2 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Norwalk	State OH	Zip Code 44857-2374	Transaction ID: 16211628 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	44037 2074	125.00
	Name of Employer Fisher-Titus Medical Cent- er	Occupatio Presiden	n It and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 250.00]
	SUBTOTAL of Receipts This Page (optional)			1125.00
	TOTAL This Period (last page this line number			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Ai	ny information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
	Full Name (Last, First, Middle Initial) Mr. John S Prout Mailing Address 10500 Montgomery Ro City Cincinnati FEC ID number of contributing federal political committee.	State OH	Zip Code 45242-4402	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Bethesda North Hospital Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Officer e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr. Edward J Roth, III Mailing Address 2600 Sixth Street SW			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 16211631
	Canton	44710-1702	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Aultman Hospital	Occupatio Presiden	n t and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Robert W Shroder Mailing Address 667 Eastland Avenue S	SE		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 16211632
	Warren	OH	44484-4503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer St. Joseph Health Center	Occupatio Presiden	n t and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
5	SUBTOTAL of Receipts This Page (optional)			925.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Charles A Stark, , CHE Mailing Address 1101 Decatur Street City	State Zip Code	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16211633
Sandusky FEC ID number of contributing federal political committee.	OH 44870-3335	Amount of Each Receipt this Period 500.00
Name of Employer Firelands Regional Health System Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Michael R Stephens Mailing Address 1141 North Monroe	Drive	Date of Receipt
City	State Zip Code	Transaction ID: 16211634
Xenia	OH 45385-1600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Greene Memorial Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Ms. Mina H Ubbing		Date of Receipt
Mailing Address 750 Fairview Drive		12 30 2008
City	State Zip Code	Transaction ID: 16211635
Lancaster FEC ID number of contributing federal political committee.	OH 43130-3313	Amount of Each Receipt this Period 300.00
Name of Employer Fairfield Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Thomas S. Urban Mailing Address 8484 Old Shaw Way City West Chester FEC ID number of contributing federal political committee. Name of Employer Mercy Health Partners Receipt For:	State Zip Code OH 45069-6400 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. LaMar L Wyse Mailing Address 975 Tiehack Court We	500.00	Date of Receipt
City Galion	State Zip Code OH 44833-2312	1 2 3 0 2 0 0 8 Transaction ID: 16211637 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Galion Community Hospital Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr Mark Armstrong		Date of Receipt
Mailing Address 310 South Limestone		12 29 2008
City Lexington	State Zip Code KY 40508-3008	Transaction ID: 16211667 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer UK HealthCare Good Samaritan Hospital Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 232 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Frank Beirne Mailing Address 310 South Limestone City Lexington FEC ID number of contributing federal political committee. Name of Employer Samaritan Hospital	State Zip Code KY 40508-3008 C Occupation Chief Executive Officer	Date of Receipt 1 2 29 2008 Transaction ID: 16211669 Amount of Each Receipt this Period 125.00
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr Joseph DeVenuto	Aggregate Year-to-Date ▼ 250.00	Date of Receipt
Mailing Address 4001 Dutchmans Land	1 2 2 9 2 0 0 8 Transaction ID: 16211674	
Louisville	State Zip Code KY 40207-4714	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Norton Suburban Hospital	Occupation Assistant Vice President/CIO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David L Gray		Date of Receipt
Mailing Address 913 North Dixie Avenu		12 29 2008
City Elizabethtown	State Zip Code KY 42701-2599	Transaction ID: 16211686 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Hardin Memorial Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional) .		675.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 232 (check only one) X
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
 	Full Name (Last, First, Middle Initial) Mr. John D Harryman Mailing Address 4001 Dutchmans Lane		7:n Code	Date of Receipt 1 2 2 9 2 0 0 8
	City Louisville	State KY	Zip Code 40207-4799	Transaction ID: 16211687
	FEC ID number of contributing federal political committee.	C	40207-4799	Amount of Each Receipt this Period 250.00
	Name of Employer Norton Suburban Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate		
	Full Name (Last, First, Middle Initial) Mr. Thomas D Kmetz Mailing Address 9820 Third Street Road	d		Date of Receipt 1 2 2 9 2 0 0 8
	City	State	Zip Code	Transaction ID: 16211691
	Louisville	KY	40272-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Norton Southwest Hospital	Occupation President		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Kevin S Wardell			Date of Receipt
	Mailing Address P O Box 35070			12 29 YYYY 12 29 2008
	City	State	Zip Code	Transaction ID: 16211708
	Louisville	KY	40232-5070	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Norton Hospital	Occupation President		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	UBTOTAL of Receipts This Page (optional)			1000.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16	
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persecutive name and address of any political committee to	son for the purpose of soliciting contributions	
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Tracy E Williams		Date of Receipt	
Mailing Address 234 East Gray Street,	Ste. 225	12 29 2008	
City	State Zip Code	Transaction ID: 16211709	
Louisville	KY 40202-1913	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Norton Healthcare	Occupation Senior Vice President		
Receipt For: Primary General	Aggregate Year-to-Date ▼	7	
Other (specify)	250.00		
Full Name (Last, First, Middle Initial) Mr. Douglas A. Winkelhake		Date of Receipt	
Mailing Address 8911 Duxburry Road			
City	State Zip Code	Transaction ID: 16211710	
Louisville	KY 40242-6910	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Norton Suburban Hospital	Occupation Chief Operating Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. David Laird		Date of Receipt	
Mailing Address 211 Coralberry Road		1 2 2 9 2 0 0 8	
City	State Zip Code	Transaction ID: 16211715	
Louisville	KY 40207-5712	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Norton Healthcare	Occupation Chief Administrative Officer		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
SUBTOTAL of Receipts This Page (optional)	1	750.00	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any persor the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert J Hudson Mailing Address P O Box 1600		Date of Receipt 1 2 2 9 2 0 0 8
City Biohmand	State Zip Code KY 40476-2603	Transaction ID: 16211780
Richmond FEC ID number of contributing federal political committee.	KY 40476-2603	Amount of Each Receipt this Period 324.00
Name of Employer Pattie A. Clay Regional Medical Center Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 324.00	-
Full Name (Last, First, Middle Initial) Ms. Mary L. Gallagher Mailing Address 155 East Broad Stre	eet,	Date of Receipt
	State Zip Code OH 43215-3609	Transaction ID: 16211853 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Vice President & General Counsel	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey Seraphine		Date of Receipt
Mailing Address 1140 Lexington Roa	ad	12 29 2008
City <u>Georgetown</u>	State Zip Code KY 40324-9330	Transaction ID: 16212209 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Lake Cumberland Regional Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	I) >	1074.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jeffrey B Barber, , Dr.PH, F Mailing Address P O Box 20007 City Owensboro FEC ID number of contributing federal political committee. Name of Employer Owensboro Medical Health System Receipt For: Primary General Other (specify)	State Zip Code KY 42304-0007 C Occupation President and Chief Executive Office Aggregate Year-to-Date 500.00	Date of Receipt 1 2 2 9 2 0 0 8 Transaction ID: 16212210 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Brian Brezosky Mailing Address Post Office Box 4366 City Louisville	20 State Zip Code KY 40253-6620	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer Kentucky Hospital Association Receipt For: Primary General Other (specify)	Occupation Senior Vice President Aggregate Year-to-Date ▼ 500.00	500.00
Full Name (Last, First, Middle Initial) Ms. Kim J. Dees Mailing Address 2501 Nelson Miller Pa Post Office Box 4366		Date of Receipt 1 2 2 9 2 0 0 8
City	State Zip Code	Transaction ID: 16212252
Louisville FEC ID number of contributing federal political committee.	KY 40223-2221	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Executive Dir, Center for Health Care Aggregate Year-to-Date 500.00	e
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Paige Franklin Mailing Address 404 Kaelin Drive City Louisville FEC ID number of contributing federal political committee. Name of Employer Kentucky Hospital Association Receipt For:	State Zip Code KY 40207-2204 C Occupation Vice President, Information Services Aggregate Year-to-Date ▼	Date of Receipt 1 2 2 9 2 0 0 8 Transaction ID: 16212253 Amount of Each Receipt this Period 500.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	500.00	
Ms. Nancy C. Galvagni Mailing Address 2501 Nelson Miller F City Louisville FEC ID number of contributing	State Zip Code KY 40253	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
rederal political committee. Name of Employer Kentucky Hospital Association Receipt For: Primary General Other (specify) ▼	C Occupation Senior Vice President Aggregate Year-to-Date ▼ 500.00	500.00
Full Name (Last, First, Middle Initial) Mr. Stephen P. Miller Mailing Address 1101 Cardinal Drive		Date of Receipt 1 2 2 9 2 0 0 8
City Louisville	State Zip Code KY 40253-6629	Transaction ID: 16212256 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	_	1500.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 232 (check only one) X
or for	offormation copied from such Reports and St commercial purposes, other than using the NME OF COMMITTEE (In Full) merican Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Fu <u>Ms</u>	Il Name (Last, First, Middle Initial) s. Sarah S. Nicholson ailing Address 2501 Nelson Miller Parl	kway		Date of Receipt
Cit	ty	State KY	Zip Code	1 2 2 9 2 0 0 8 Transaction ID: 16212257
FE	ouisville C ID number of contributing deral political committee.	C	40223-2221	Amount of Each Receipt this Period 500.00
<u>tio</u>	eme of Employer entucky Hospital Associa- n eceipt For: Primary General Other (specify)		n sident, Government Relation o Year-to-Date ▼ 500.00	IS .
. <u>Ms</u>	III Name (Last, First, Middle Initial) s. Debbie Riley ailing Address 502 Trotwood Place			Date of Receipt
Cit	ty	State	Zip Code	1 2 2 9 2 0 0 8 Transaction ID: 16212258
Lo	puisville	KY	40245-4071	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		500.00
tio			ancial Officer	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	II Name (Last, First, Middle Initial) s. Carol J. Walters			Date of Receipt
Ma	ailing Address Post Office Box 436629	9		12 29 2008
Cit	•	State	Zip Code	Transaction ID: 16212259
	puisville	KY	40253-6629	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		500.00
<u>tio</u>		Occupation Vice Pres	sident	
Re	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
SUB	TOTAL of Receipts This Page (optional)			1500.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 232 (check only one) X 11a
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Charles J. Warnick Mailing Address 120 Hillitop Meadow			Date of Receipt 1 2 2 9 2 0 0 8
	City Frankfort	State KY	Zip Code	Transaction ID: 16212260
	Frankfort FEC ID number of contributing federal political committee.	C	46001	Amount of Each Receipt this Period 500.00
	Name of Employer Baptist Hospital East Receipt For: Primary General Other (specify) ▼		of Planning Year-to-Date ▼]
3.	Full Name (Last, First, Middle Initial) Mr. Patrick Donahue Mailing Address 4604 Highway 60 Wes	t		Date of Receipt 1 2 2 9 2 0 0 8
	City	State	Zip Code	Transaction ID: 16212261
	<u>Morganfield</u>	KY	42437-9570	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Methodist Hospital Union County	Occupation Administ	rator	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
. –	Full Name (Last, First, Middle Initial) Mr. Nemuel O Artiles, , FACHE			Date of Receipt
	Mailing Address Post Office Box 859			12 31 YYYY 2008
	City	State	Zip Code	Transaction ID: 16212481
	Humacao	PR	00792-0859	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Hospital Episcopal Cristo Redentor		e Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		\	1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate for each cate Detailed Sum	gory of the (FOR LINE NUMBER: PAGE 156 / 232 (check only one) X 11a 11b 11c 12 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or us name and address of any politi	sed by any person cal committee to s	for the purpose of soliciting contributions
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Jerry Haynes			Date of Receipt
Mailing Address P O Box 8086			12 31 2008
City	State Zip Code		Transaction ID: 16212500
Lexington	KY 40533-8086	5	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Appalachian Regional Heal- thcare	Occupation President and Chief Exc	ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	500.00	
Full Name (Last, First, Middle Initial) Ms. Evelyn Letnaunchyn			Date of Receipt
Mailing Address 225 Ariel Heights			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 16212501
Charleston	WV 25311-1143	3	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer n/a	Occupation Homemaker		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	500.00	
Full Name (Last, First, Middle Initial) Mrs. Lisa Schnedler			Date of Receipt
Mailing Address 304 Franklin			12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 16212503
Keosauqua	IA 52565-1164	1	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Van Buren County Hospital	Occupation Administrator		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	350.00	
SUBTOTAL of Receipts This Page (optional)			1350.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 232 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Mr. Larry Chapman			Date of Receipt
	Mailing Address 116 Woodgreen Cross	sing		12 30 7 2008
	City Jackson	State MS	Zip Code 39130	Transaction ID: 16212533
	FEC ID number of contributing federal political committee.	C	39130	Amount of Each Receipt this Period 15.84
	Name of Employer Mississippi Hospital Asso- ciation	Occupatio VP for In	n formation Systems	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 207.55	
- В.	Full Name (Last, First, Middle Initial) Mr. Bob Jones Mailing Address - FOO Highway O South	1		Date of Receipt
	Mailing Address 500 Highway 9 South			12 30 2008
	City	State MS	Zip Code	Transaction ID: 16212539
	Eupora FEC ID number of contributing federal political committee.	C	39744-2215	Amount of Each Receipt this Period 125.00
	Name of Employer North Mississippi Medical Center-Eupor	Occupatio Vice Pres	n sident- Materiel Managemen	ut
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 235.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Richard G Hilton	1		Date of Receipt
	Mailing Address Drawer 1506			1 2 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 16212545
	Starkville FEC ID number of contributing federal political committee.	C	39760-1506	Amount of Each Receipt this Period 125.00
	Name of Employer Oktibbeha County Hospital	Occupatio Associat	n e Administrator and Chief Fi	na
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	1		265.84
	TOTAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Mr. Larry C. Bourne Mailing Address 424 Autumn Oak Drive		Date of Receipt 1 2
	City	State Zip Code	Transaction ID: 16212546
	Madison FEC ID number of contributing federal political committee.	MS 39110-9148	Amount of Each Receipt this Period 250.00
	Name of Employer HPI Company Receipt For: Primary General Other (specify)	Occupation President and CEO Aggregate Year-to-Date ▼ 262.50	
_ 3.	Full Name (Last, First, Middle Initial) Ms. Judith Forshee Mailing Address Post Office Box 1909		Date of Receipt
	City	State Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16212547
	Madison	MS 39130-1909	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	15.00
	Name of Employer Mississippi Hospital Asso- ciation	Occupation Director of Education	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 202.50	
. –	Full Name (Last, First, Middle Initial) Ms. Julie McNeese		Date of Receipt
	Mailing Address 116 Woodgreen Crossi	ng	1 2 3 0 2 0 0 8
	City	State Zip Code	Transaction ID: 16212550
	Madison	MS 39110-4522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	15.00
	Name of Employer Mississippi Hospital Asso- ciation	Occupation Vice President, MHA/DSI	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 207.50	
	SUBTOTAL of Receipts This Page (optional)		280.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personen name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Eileen L Howell Mailing Address 23761 Oak Glen Dr. City Southfield FEC ID number of contributing federal political committee. Name of Employer Michigan Orthopaedic Specialty Hospita Receipt For: Primary General	State Zip Code MI 48033-6503 C Occupation Director, Behavioral Services Aggregate Year-to-Date ▼	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: 16212572 Amount of Each Receipt this Period 300.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Roger J Allman Mailing Address 510 Miles Ridge Road	300.00 d	Date of Receipt 1 2 3 1 2 0 0 8
City Madison FEC ID number of contributing federal political committee. Name of Employer King's Daughters' Hospital and Health Receipt For: Primary General Other (specify)	State Zip Code IN 47250-2420 C Occupation Chief Executive Officer Aggregate Year-to-Date 259.00	Transaction ID: 16213384 Amount of Each Receipt this Period 9.00
Full Name (Last, First, Middle Initial) Mr Paul Usher Mailing Address 637 Laura Lane City Sweetser FEC ID number of contributing federal political committee. Name of Employer Marion General Hospital	State Zip Code IN 46987 C Occupation	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Marion General Hospital Receipt For: Primary General Other (specify)	President/CEO Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	······	384.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David H. Wiesman Mailing Address 4521 Hickory Grov City Greenwood FEC ID number of contributing federal political committee. Name of Employer Indiana Hospital Association Receipt For: Primary General	State Zip Code IN 46143-7448 C Occupation Hospital Association VP Aggregate Year-to-Date ▼	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. James D. Bickel Mailing Address 4370 Washington S City Columbus FEC ID number of contributing	Street State Zip Code IN 47203-1139	Date of Receipt M M M / D 3 1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	Occupation Director Materials Management Aggregate Year-to-Date 250.00	_
Full Name (Last, First, Middle Initial) Dr James Callaghan III, , M.D. Mailing Address 301 West Homer S City Michigan City FEC ID number of contributing federal political committee.	State Zip Code IN 46360-4358	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Saint Anthony Memorial Receipt For: Primary General Other (specify) ▼	Occupation Vice President Medical Affairs Aggregate Year-to-Date 300.00	_
SUBTOTAL of Receipts This Page (options		675.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Tom J Gryzbek Mailing Address 1335 Capri Lane City	State Zip Code	Date of Receipt M
Dyer FEC ID number of contributing federal political committee.	IN 46311-1324	Amount of Each Receipt this Period 375.00
Name of Employer Saint Margaret Mercy Heal- thcare Center Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 375.00	
Full Name (Last, First, Middle Initial) Marvin White Mailing Address 6515 Greenridge	Drive	Date of Receipt 1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16213439
Indianapolis	IN 46278-2225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Vincent Health	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Linda Q. Everett Mailing Address 11340 Abbitt Trail		Date of Receipt 1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16213440
<u>Zionsville</u>	IN 46077-0016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Clarian Health	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
SURTOTAL of Receipts This Page (ontion	nal)	1625.00

Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
1/		
Full Name (Last, First, Middle Initial) Mr. Marvin G Pember Mailing Address 1701 North Senate E		Date of Receipt 1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16213445
Indianapolis FEC ID number of contributing federal political committee.	IN 46202	Amount of Each Receipt this Period 750.00
Name of Employer Clarian Health Partners Receipt For: Primary General Other (specify) ▼	Occupation Hospital EVP and CFO Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Ms. Andrea Y Coleman Mailing Address 1227 East Rusholme	Street	Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16213471
<u>Davenport</u>	IA 52803-2498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	900.00
Name of Employer Trinity Medical Center-We-	Occupation Chief Executive Officer	
st Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name (Last, First, Middle Initial) Ms. Lena Dobbs-Johnson		Date of Receipt
Mailing Address 3435 West Van Bure	n Street	12 30 2008
City	State Zip Code	Transaction ID: 16213472
Chicago	IL 60624-3312	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Advocate Bethany Hospital	Occupation President	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		2050.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal committee to any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۹.	Full Name (Last, First, Middle Initial) Mr. Robert Green Mailing Address 774 Forest Avenue		Date of Receipt
			12 30 2008
	City Glen Ellyn	State Zip Code IL 60137-3939	Transaction ID: 16213482 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer Advocate Health Care	Occupation Manager	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Dean M Harrison		Date of Receipt
	Mailing Address 251 East Huron Stree	t	12 30 2008
	City	State Zip Code	Transaction ID: 16213483
	Chicago FEC ID number of contributing federal political committee.	IL 60611-2908	Amount of Each Receipt this Period 900.00
	Name of Employer Northwestern Memorial Hos- pital	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 900.00]
 :.	Full Name (Last, First, Middle Initial) Mr. Gary E Kaatz		Date of Receipt
	Mailing Address 2400 North Rockton A	venue	12 30 7 9 9 9
	City	State Zip Code	Transaction ID: 16213485
	Rockford FEC ID number of contributing federal political committee.	IL 61103-3692	Amount of Each Receipt this Period 1200.00
	Name of Employer Rockford Memorial Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
\[\frac{1}{5}\]	SUBTOTAL of Receipts This Page (optional) .		2500.00
	FOTAL This Period (last page this line number	•	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 232 (check only one) X
Any information copied from such Report or for commercial purposes, other than under the NAME OF COMMITTEE (In Full) American Hospital Association	s and Statements may not be sold or used by any perso sing the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr Michael McKenna, , M.D. Mailing Address 3815 Highland A City Downers Grove FEC ID number of contributing federal political committee. Name of Employer Advocate Good Samaritan Hospital Receipt For: Primary General	State Zip Code IL 60515-1590 C Occupation Vice President Medical Management Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Dennis C Millirons, , FACHE Mailing Address 801 S Milwauke City Libertyville FEC ID number of contributing federal political committee.	250.00 e Avenue State Zip Code IL 60048-3204 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Condell Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 1200.00	
Mr. David T Ochs Mailing Address 2500 West Reyl City Pontiac FEC ID number of contributing federal political committee. Name of Employer OSF Saint James - John W. Albrecht Med Receipt For: Primary General	State Zip Code IL 61764-2194 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M
Other (specify) ▼ SUBTOTAL of Receipts This Page (opt	900.00 ional)	2350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any pee name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Kenneth L Smithmier Mailing Address 2300 North Edward S City Decatur FEC ID number of contributing federal political committee. Name of Employer Decatur Memorial Hospital Receipt For:	State Zip Code IL 62526-4192 C Occupation President and Chief Executive Office Aggregate Year-to-Date	Date of Receipt M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	1200.00	Date of Branchi
Mr. Keith E Steffen Mailing Address 530 NE Glen Oak Ave		Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16213495
Peoria FEC ID number of contributing federal political committee.	IL 61637-0001	Amount of Each Receipt this Period 400.00
Name of Employer OSF Saint Francis Medical Center Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Administrator and Chief Executive Aggregate Year-to-Date 402.50	Offi
Full Name (Last, First, Middle Initial) Mr. Wilfredo Ramos		Date of Receipt
Mailing Address 2025 Windsor Drive		12 30 2008
City Oak Brook	State Zip Code IL 60523-1586	Transaction ID: 16213497
FEC ID number of contributing federal political committee.	C 60523-1586	Amount of Each Receipt this Period 600.00
Name of Employer Advocate Health Care	Occupation Executive VP/Chief Operating Office	per
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional) .	•	2200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for eac	eparate schedule(s) h category of the d Summary Page	FOR LINE NUMBER: PAGE 166 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or f	r information copied from such Reports and Stor commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be so name and address of ar	old or used by any person ny political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	American Hospital Association PAC			
A. .	Full Name (Last, First, Middle Initial) Ms. Elena Butkus	. 1		Date of Receipt
	Mailing Address 1151 E. Warrenville Ro			12 30 4 2008
	City Naperville	State Zip C	ode 3-9339	Transaction ID: 16213499 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President, Fi	nance	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-D	1206.25	
3.	Full Name (Last, First, Middle Initial) Ms. Nancy DeMarco Mailing Address 1151 East Warrenville	Pond		Date of Receipt
				12 30 7 2008
	City Naperville	State Zip C	ode 3-9339	Transaction ID: 16213500
·	FEC ID number of contributing federal political committee.	C	3-9339	Amount of Each Receipt this Period 300.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Director of Develo	ppment	7
	Receipt For: Primary General Other (specify)	Aggregate Year-to-D	1206.25	
	Full Name (Last, First, Middle Initial) Mr. Ed Holzhauer			Date of Receipt
	Mailing Address 1755 Maple Lane			12 30 7 2008
	City	State Zip C		Transaction ID: 16213501
	Wheaton FEC ID number of contributing federal political committee.	IL 6018	7-3317	Amount of Each Receipt this Period 300.00
	Name of Employer Central DuPage Hospital	Occupation President		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	1050.02	
SU	IBTOTAL of Receipts This Page (optional)			900.00
	OTAL This Period (last page this line number of		<u> </u>	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 167 / 232 (check only one) X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠	Full Name (Last, First, Middle Initial) Ms. Teresa Hursey Mailing Address 1151 East Warrenville		Date of Receipt 1 2 3 0 2 0 0 8
	City Naperville	State Zip Code IL 60563-9339	Transaction ID: 16213502
	FEC ID number of contributing federal political committee.	C 60563-9339	Amount of Each Receipt this Period 300.00
	Name of Employer Illinois Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Vice President, Finance Aggregate Year-to-Date ▼ 1206.25	
3.	Full Name (Last, First, Middle Initial) Ms. Patricia Merryweather-Arges Mailing Address 1151 E. Warrenville Ro	pad	Date of Receipt
	PO Box 3015 City	State Zip Code	12 30 2008
	Naperville	IL 60563-9339	Transaction ID: 16213503 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1206.25	
	Full Name (Last, First, Middle Initial) Mr. Howard A. Peters, III		Date of Receipt
	Mailing Address 4109 Southwoods Roa	d	12 30 Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 16213504
	Springfield	IL 62707-6070	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1206.25	
	SUBTOTAL of Receipts This Page (optional)		900.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 232 (check only one) X
C	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Kenneth C. Robbins		Date of Receipt
	Mailing Address 1531 Maria Court		12 30 7 2008
	City Wheaton	State Zip Code IL 60187-3777	Transaction ID: 16213505 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Illinois Hospital Associa- tion	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1206.25	
- 3.	Full Name (Last, First, Middle Initial) Ms. Laraine Williams Mailing Address 1151 E. Warrenville R	land.	Date of Receipt
	waining Address 1151 E. Warrenville H	ioad	12 30 7 2008
	City Naperville	State Zip Code IL 60563-9339	Transaction ID: 16213506
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 300.00
	Name of Employer Illinois Hospital Associa- tion	Occupation Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1206.25	
_	Full Name (Last, First, Middle Initial) Mr. Christopher R Mosley	I.	Date of Receipt
	Mailing Address P O Box 2028		1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: 16213991
	Chesapeake FEC ID number of contributing federal political committee.	VA 23327-2028	Amount of Each Receipt this Period 350.00
	Name of Employer Chesapeake General Hospit- al	Occupation President and Chief Executive Office	r
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Г		1	950.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions colicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Gwen S Eddleman, , FACHE, E Mailing Address 1690 Dood St. City Farmville	State Zip Code VA 23901-2783	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Southside Community Hospital Receipt For: Primary General Other (specify)	Occupation President and Chief Executive Officer Aggregate Year-to-Date 350.00	350.00
Full Name (Last, First, Middle Initial) Mr. Brian Cournoyer Mailing Address 110 Barnes Road City	State Zip Code	Date of Receipt M
Wallingford FEC ID number of contributing federal political committee.	CT 06492-1802	Amount of Each Receipt this Period 250.00
Name of Employer Connecticut Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Manager, Government Relations Aggregate Year-to-Date 250.00	_
Full Name (Last, First, Middle Initial) Dr. Brian Fillipo, MD Mailing Address 6192 Moores Creek	_ L	Date of Receipt
City	State Zip Code	Transaction ID: 16214046
Summerfield	NC 27358-8285	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Connecticut Hospital Asso- ciation	Occupation Vice President, Quality and Patient Sa	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
)	1100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Susan L Davis, , R.N., Ed Mailing Address 72 north park avenue City Easton FEC ID number of contributing federal political committee. Name of Employer St. Vincent's Medical Center Receipt For: Primary General Other (specify)	State Zip Code CT 06612-1417 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt 1 2
Full Name (Last, First, Middle Initial) Ms. Patricia L Robertson Mailing Address 2 Bernardine Drive City Newport News FEC ID number of contributing federal political committee. Name of Employer Mary Immaculate Hospital Receipt For: Primary General Other (specify)	State Zip Code VA 23602-4404 C Occupation Executive Vice President and Adminis Aggregate Year-to-Date 350.00	Date of Receipt M M D D D 2 0 0 8
Full Name (Last, First, Middle Initial) Mr Carl Bahnlein Mailing Address 1701 North George Ma City Arlington FEC ID number of contributing federal political committee. Name of Employer Virginia Hospital Center - Arlington Receipt For: Primary General Other (specify)	State Zip Code VA 22205-3698 C Occupation Executive Vice President and COO Aggregate Year-to-Date 350.00	Date of Receipt 12 31 2008 Transaction ID: 16214071 Amount of Each Receipt this Period 350.00
SUBTOTAL of Receipts This Page (optional)	>	1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used ne name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Angela Russell Mailing Address 36 Sherry Dell Dr		Date of Receipt
City	State Zip Code	1 2 3 1 2 0 0 8 Transaction ID: 16214267
Hampton	VA 23666-1822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bon Secours-DePaul Medical Center	Occupation Director Managed Care	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	350.00
Full Name (Last, First, Middle Initial) Mr. Daniel J. Barchi		Date of Receipt
Mailing Address 3701 Wellington Driv	е	12 31 7 2008
City	State Zip Code	Transaction ID: 16214269
Roanoke	VA 24014-6466	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Health System	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼		350.00
Full Name (Last, First, Middle Initial) Ms. Jennifer W. Siciliano		Date of Receipt
Mailing Address 8110 Gatehouse Roa Suite 200 East Towe	r	12 31 2008
City Falls Church	State Zip Code VA 22042-1210	Transaction ID: 16214274
	VA 22042-1210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation Asst VP Government Rela	tions
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼		350.00
		1050.00

	LE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 232 (check only one) X
or for comme	on copied from such Reports and Stroial purposes, other than using the COMMITTEE (In Full) n Hospital Association PAC	tatements may name and ado	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name Mr. Peter J Mailing Ad City		State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	nd imber of contributing itical committee.	C	23226-1900	Amount of Each Receipt this Period 350.00
unity Hosp Receipt Fo	or:	Occupation CEO Aggregate	Year-to-Date ▼ 350.00	
Mr. William	(Last, First, Middle Initial) D Jacobsen dress 540 Jubal Early Hwy			Date of Receipt
City		State	Zip Code	Transaction ID: 16214276
Wirtz		VA	24184	Amount of Each Receipt this Period
	imber of contributing itical committee.	С		350.00
Name of E Carilion Fr <u>Hospital</u>	mployer anklin Memorial	Occupation Chief Exe	n ecutive Officer	
Receipt Fo		Aggregate	Year-to-Date ▼ 350.00	
	(Last, First, Middle Initial) s Thompson			Date of Receipt
Mailing Ad	dress 6015 Poplar Hall Drive	Ste 300		12 31 2008
City		State	Zip Code	Transaction ID: 16214277
	imber of contributing itical committee.	C	23502	Amount of Each Receipt this Period 350.00
Name of E Sentara H	imployer ealthcare	Occupation VP, Rein	n Venting Decision Support	
Receipt Fo		Aggregate	Year-to-Date ▼ 350.00	
SUBTOTAL	of Receipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. J Knox Singleton Mailing Address 8110 Gatehouse Road		Date of Receipt
City	State Zip Code	1 2 3 1 2 0 0 8 Transaction ID: 16214279
Falls Church	VA 22042-1210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr John R Audett, , M.D.		Date of Receipt
Mailing Address 455 Tollgate Road		12 31 2008
City	State Zip Code	Transaction ID: 16214282
Warwick	RI 02886-2770	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Kent County Memorial Hosp- ital	Occupation Vice President, Medical Director	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Ellen Yoder		Date of Receipt
Mailing Address 802 Reliance Rd		12 31 2008
City	State Zip Code	Transaction ID: 16214293
Middletown FEC ID number of contributing federal political committee.	VA 22645-3702	Amount of Each Receipt this Period 350.00
Name of Employer Valley Health System	Occupation Executive Director	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00
TOTAL This Period (last page this line number of		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 232 (check only one) X 11a
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAGE	nd Statements may not be sold or used by any pers the name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Patricia Schmehl Mailing Address 3221 Sargent Drive City	State Zip Code	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: 16214295
Falls Church FEC ID number of contributing federal political committee.	VA 22044-1614	Amount of Each Receipt this Period 350.00
Name of Employer Inova Fairfax Hospital Receipt For: Primary Other (specify) ▼	Occupation Senior Director Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Gerald Seager Mailing Address 7509 Mendota Place	ce	Date of Receipt 1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16214304
Springfield FEC ID number of contributing federal political committee.	VA 22150-4123	Amount of Each Receipt this Period 350.00
Name of Employer Inova Health System	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Richard A. Hanson Mailing Address 7848 Crittenden Ro	pad	Date of Receipt 1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: 16214308
Suffolk FEC ID number of contributing federal political committee.	VA 23432-1726	Amount of Each Receipt this Period 350.00
Name of Employer Bon Secours-DePaul Medical Center Receipt For:	Occupation Chief Executive Officer	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional		1050.00

Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Wayne Sawyer Mailing Address 4001 River Park Dr.	Statements may not be sold or used by any person rename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ms. Wayne Sawyer		
City	State Zip Code	Date of Receipt M M
Suffolk FEC ID number of contributing federal political committee.	VA 23435-3356	Amount of Each Receipt this Period 350.00
Name of Employer Bon Secours Hampton Rd Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. Chris A Lumsden Mailing Address 2204 Wilborn Avenue		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City South Boston	State Zip Code VA 24592-1645	Transaction ID: 16214899 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 24332-1043	350.00
Name of Employer Halifax Regional Health System Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. John Fay		Date of Receipt
Mailing Address 6623 Madison Mclean	Drive	1 2 3 1 2 0 0 8
City McLean	State Zip Code VA 22101-2902	Transaction ID: 16214912 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 232 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Thomas S Kluge Mailing Address 2204 Wilborn Aven	ue		Date of Receipt
City South Boston FEC ID number of contributing	State VA	Zip Code 24592-1638	Transaction ID: 16214922 Amount of Each Receipt this Period
Name of Employer Halifax Regional Health System Receipt For: Primary General Other (specify)		n erating Officer e Year-to-Date ▼	350.00
Full Name (Last, First, Middle Initial) Ms. Barbara Doyle Mailing Address 5901 Mount Eagle I	Drive		Date of Receipt 1 2 3 1 2 0 0 8
City	State	Zip Code	Transaction ID: 16214938
Alexandria	VA	22303-2502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Inova Alexandria Hospital	Occupation CEO	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Cynda Tipple	•		Date of Receipt
Mailing Address 973 N. Potomac St	reet		12 31 7 2008
City	State VA	Zip Code	Transaction ID: 16215016
Arlington FEC ID number of contributing federal political committee.	C	22205-1649	Amount of Each Receipt this Period 350.00
Name of Employer Prince William Hospital	Occupation Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	al)	_	1050.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 232 (check only one) X
or for	oformation copied from such Reports and St commercial purposes, other than using the NAME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements may name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A. <u>Ms</u>	II Name (Last, First, Middle Initial) s. Sharon M. Bass, Jr. ailing Address 2619 Blue Hernon Circl	le State	Zip Code	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: 16215018
<u>Ro</u> FE	canoke CID number of contributing deral political committee.	C	24018-5133	Amount of Each Receipt this Period 350.00
	exame of Employer arilion Health System secipt For: Primary General Other (specify)		ident Imaging & Pharmacy Year-to-Date ▼ 350.00	
B. <u>Dr</u>	Il Name (Last, First, Middle Initial) Gene Burke, , M.D. ailing Address 600 Gresham Drive			Date of Receipt
FE	orfolk COID number of contributing deral political committee.	State VA	Zip Code 23507-1999	Transaction ID: 16215019 Amount of Each Receipt this Period 350.00
Se <u>Ho</u>	me of Employer entara Norfolk General ospital oceipt For: Primary General Other (specify)		ident Medical Affairs Year-to-Date ▼ 350.00	
. <u>M</u> s	II Name (Last, First, Middle Initial) s. Barbara Charlton ailing Address 11797 Troika Court			Date of Receipt 1 2 3 1 2 0 0 8
Cit W	ry Oodbridge	State VA	Zip Code 22192-6285	Transaction ID: 16215025 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C		350.00
Na Po	ime of Employer otomac Hospital	Occupation Vice Pres		
Re	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	
SUB	TOTAL of Receipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Donald E. Lorton Mailing Address 1141 Windy Hill Ro City Goodview FEC ID number of contributing federal political committee. Name of Employer Carilion Health System	State Zip Code VA 24095-2909 C Occupation Vice President	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: 16215026 Amount of Each Receipt this Period 350.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Mark Szalwinski Mailing Address 104 Watch Harbour	Circle	Date of Receipt M
City	State Zip Code	Transaction ID: 16215095
Smithfield FEC ID number of contributing federal political committee.	VA 23430-2326	Amount of Each Receipt this Period 50.00
Name of Employer Sentara Healthcare	Occupation Director of Pharmacy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Robert Hager		Date of Receipt
Mailing Address 14359 Shadowbroo	k Lane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16215096
Purcellville	VA 20132-1754	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System	Occupation Assistant Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
CURTOTAL of Descripts This Days (actions	l) >	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAG	2	
Full Name (Last, First, Middle Initial) Mr. Patrick L. Christiansen		Date of Receipt
Mailing Address 8377 Pedigrue Ct		12 31 7 2008
City <u>Gaines</u> ville	State Zip Code VA 20155-3240	Transaction ID: 16215098
FEC ID number of contributing federal political committee.	C 20133-3240	Amount of Each Receipt this Period 350.00
Name of Employer Inova Health System	Occupation Administration	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Debra A Flores		Date of Receipt
Mailing Address 3609 Calverton Wa	у	12 31 7 2008
City	State Zip Code	Transaction ID: 16215101
Chesapeake	VA 23321-4455	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara CarePlex Hospital	Occupation Vice President and Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Mark Bower		Date of Receipt
Mailing Address 1000 Shenandoah	Avenue	12 31 2008
City	State Zip Code	Transaction ID: 16215102
Front Royal	VA 22630-3598	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Warren Memorial Hospital	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	J)	1050.00
TOTAL This Period (last page this line num	·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 232 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Cindy Dolan		Date of Receipt
Mailing Address 10988 N. Harrell's Fe	rry Rd.	12 30 7 2008
City	State Zip Code	Transaction ID: 16216332
Baton Rouge	LA 70816-8359	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HSLI	Occupation President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	7
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Mr. Conrad G Flowers		Date of Receipt
Mailing Address 1900 Main Street		1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16216335
Franklinton	LA 70438-3688	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Riverside Medical Center	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Rick Guevara		Date of Receipt
Mailing Address 200 Henry Clay Aven	ue	12 30 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 16216336
New Orleans	LA 70118-5798	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Children's Hospital	Occupation Vice-President of Legal Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may rename and address	not be sold or used by any person ess of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr Bill Hankins			Date of Receipt
Mailing Address P O Box 33932			12 30 2008
City Shreveport	State LA	Zip Code 71130-3932	Transaction ID: 16216337 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer LSU Medical Center-Univer- sity Hospital Receipt For: Primary General Other (specify) ▼	+ +	Administrator ∕ear-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Michael Hulefeld Mailing Address 1514 Jefferson Highwa	ay		Date of Receipt 1 2 3 0 2 0 0 8
City	State	Zip Code	Transaction ID: 16216338
New Orleans FEC ID number of contributing federal political committee.	C	70121-2429	Amount of Each Receipt this Period 250.00
Name of Employer Ochsner Health System	Occupation Senior VP	and COO	
Receipt For: Primary General Other (specify) ▼	, '	/ear-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Glenn Landry			Date of Receipt
Mailing Address 10988 N. Harrell's Fer	ry Rd.		12 30 YYYYY 12 30 2008
City Baton Rouge	State LA	Zip Code 70816-8359	Transaction ID: 16216339
FEC ID number of contributing federal political committee.	C	70010-0339	Amount of Each Receipt this Period 250.00
Name of Employer HSLI	Occupation Executive	VP	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1		750.00
TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
An	for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Donna Shields		Date of Receipt
	Mailing Address 1701 Oak Park Boulev		12 30 7 2008
	City Lake Charles	State Zip Code LA 70601-8911	Transaction ID: 16216342
	FEC ID number of contributing federal political committee.	LA 70601-8911	Amount of Each Receipt this Period 250.00
	Name of Employer Lake Charles Memorial Hos- pital	Occupation VP Patient Care	
	Receipt For: ☐ Primary ☐ General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Michael J Sniffen		Date of Receipt
	Mailing Address 340 1/2 Garden Street		12 30 2008
	City	State Zip Code	Transaction ID: 16216343
	Hoboken FEC ID number of contributing federal political committee.	NJ 07030-3802	Amount of Each Receipt this Period 250.00
	Name of Employer Touro Infirmary	Occupation President/CEO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Terrie Sterling		Date of Receipt
	Mailing Address 5000 Hennessy Boule	vard	12 30 2008
	City	State Zip Code	Transaction ID: 16216344
	Baton Rouge FEC ID number of contributing federal political committee.	LA 70808-4375	Amount of Each Receipt this Period 250.00
	Name of Employer Our Lady of the Lake Regi- onal Medical	Occupation Chief Operating Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
S	UBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	of the
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used be name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Kevin Bridwell		Date of Receipt
Mailing Address 9521 Brookline		12 7 30 7 2008
City	State Zip Code	Transaction ID: 16216345
Baton Rouge	LA 70809-1431	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Louisiana Hospital Associ- ation	Occupation Director of Healthcare Reim	nbursement
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3	00.00
Full Name (Last, First, Middle Initial) Ms. Coletta Barrett, RN, MHA	I	Date of Receipt
Mailing Address 5000 Hennessy Boule	vard	12 30 2008
City	State Zip Code	Transaction ID: 16216346
Baton Rouge	LA 70808-4375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Our Lady of the Lake Regi- onal Medical	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
Full Name (Last, First, Middle Initial) Mr. James K Elrod	1	Date of Receipt
Mailing Address 2600 Greenwood Roa	d	12 30 2008
City	State Zip Code	Transaction ID: 16216347
Shreveport	LA 71130-2600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Willis-Knighton Health Sy- stem	Occupation President and Chief Execut	ive Officer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
		1300.00

SCHEDULE A (FEC FO ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Re or for commercial purposes, other th	eports and Statements may not be sold or used by any perso an using the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Associati		
Full Name (Last, First, Middle Init Mr. John J Finan, , Jr. Mailing Address 4200 Essen		Date of Receipt
		12 30 2008
City <u>Baton Rouge</u>	State Zip Code LA 70809-2196	Transaction ID: 16216348 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Franciscan Missionaries of Our Lady He	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Init Ms. Patricia T. Jeter	<i>'</i>	Date of Receipt
Mailing Address 17853 Prest	wick Avenue	12 30 2008
City	State Zip Code	Transaction ID: 16216349
Baton Rouge FEC ID number of contributing federal political committee.	LA 70810-7994	Amount of Each Receipt this Period 500.00
Name of Employer Louisiana Hospital Associ- ation	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Init	ial)	Date of Receipt
Mailing Address 1125 West H	Highway 30	12 DD / YYYY 12 30 2008
City Gonzales	State Zip Code LA 70737-5004	Transaction ID: 16216350
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer St. Elizabeth Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page	(optional)	1500.00
	line number only)	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 232 (check only one) X
or for cor	rmation copied from such Reports and St mmercial purposes, other than using the E OF COMMITTEE (In Full) crican Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Mailin	Iame (Last, First, Middle Initial) Ion J Moore Ing Address 901 Wilson Street	Old	7.0.4	Date of Receipt 1 2 3 0 2 0 0 8
City	yette	State LA	Zip Code 70503-2439	Transaction ID: 16216351
FEC	ID number of contributing al political committee.	C	70503-2439	Amount of Each Receipt this Period 500.00
tal Recei	e of Employer Place Surgical Hospi- ipt For: Primary General Other (specify)	Occupation CEO Aggregate	Year-to-Date ▼ 500.00]
Ms. P	lame (Last, First, Middle Initial) hyllis Peoples, , MSN, R.N ng Address P O Box 6037			Date of Receipt 1 2 3 0 2 0 0 8
City		State	Zip Code	Transaction ID: 16216352
<u>Hour</u>	ma	LA	70361-6037	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		500.00
Terre Cente			t and Chief Executive Office	r
Rece	ipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 500.00]
	lame (Last, First, Middle Initial) tephen F Wright			Date of Receipt
Mailin	ng Address 3330 Masonic Drive			12 30 YYYY 2008
City		State	Zip Code	Transaction ID: 16216353
Alex	andria	LA	71301-3899	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		500.00
<u>ini Ho</u>	e of Employer ISTUS St. Frances Cabr- ospital	_	t and Chief Executive Office	r
	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00]
CURTO	TAL of Receipts This Page (optional)	<u> </u>		1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Karen Sue Zoeller		Date of Receipt
Mailing Address 9521 Brookline Avenue	е	12 30 7 2008
City	State Zip Code	Transaction ID: 16216354
Baton Rouge	LA 70809-1431	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Louisiana Hospital Associ- ation	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Clark R. Cosse, III	I	Date of Receipt
Mailing Address 9521 Brookline Avenue	е	12 / 30 / 2008
City	State Zip Code	Transaction ID: 16216355
Baton Rouge	LA 70809-8409	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer Louisiana Hospital Associ- ation	Occupation Vice President, Legal & Government	: Aff
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) Mr. Paul A. Salles	l	Date of Receipt
Mailing Address 644 Apache Drive		1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16216356
Abita Springs	LA 70420-3331	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Metropolitan Hospital Cou- ncil of New O	Occupation President & Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	······	1875.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 232 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAG	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Edwin E Dahlberg Mailing Address 2342 S. Swallowtai	Illana		Date of Receipt
City	State	Zip Code	1 2 3 0 2 0 0 8 Transaction ID: 16216461
Boise FEC ID number of contributing federal political committee.	C	83706-6127	Amount of Each Receipt this Period 500.00
Name of Employer St. Luke's Health System Receipt For:	- 	n t and Chief Executive Officer	,
Primary General Other (specify) ▼	1 39.59.6	500.00	
Full Name (Last, First, Middle Initial) Mr Ken L Harman Mailing Address 528 Teton Drive	•		Date of Receipt 1 2 3 0 2 0 0 8
City	State	Zip Code	Transaction ID: 16216462
Burley	ID	83318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Cassia Regional Medical Center	Occupation Director		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Steven A. Millard			Date of Receipt
Mailing Address 615 N. 7th Street			12 30 2008
City	State	Zip Code	Transaction ID: 16216463
Eagle FEC ID number of contributing federal political committee.	C	83702-5502	Amount of Each Receipt this Period 526.60
Name of Employer Idaho Hospital Association	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 526.60	
SUBTOTAL of Receipts This Page (optional	al)		1526.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Patrick M Hermanson, , FACHE Mailing Address 651 Memorial Drive City	State	Zip Code	Date of Receipt M
Pocatello FEC ID number of contributing federal political committee.	ID C	83201-4071	Transaction ID: 16216464 Amount of Each Receipt this Period 250.00
Name of Employer Portneuf Medical Center Receipt For: Primary General Other (specify) ▼		n t and Chief Executive Officer e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joseph P Caroselli Mailing Address P O Box 1100			Date of Receipt 1 2 3 0 2 0 0 8
City Boise FEC ID number of contributing federal political committee.	State ID	Zip Code 83701-1100	Transaction ID: 16216465 Amount of Each Receipt this Period 201.60
Name of Employer Idaho Elks Rehabilitation Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupatio Administ Aggregate		
Full Name (Last, First, Middle Initial) Ms. Karen J Kellie, , R.N. Mailing Address 3960 Campbell Road			Date of Receipt
City New Meadows FEC ID number of contributing federal political committee.	State ID	Zip Code 83654-5031	Transaction ID: 16216474 Amount of Each Receipt this Period 30.00
Name of Employer McCall Memorial Hospital Receipt For: □ Primary □ General □ Other (specify) ▼	- ' '	n t and Administrator e Year-to-Date ▼ 530.00	
SUBTOTAL of Receipts This Page (optional) .			481.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joseph E Morris		Date of Receipt
Mailing Address 2003 Lincoln Way City Coeur D Alene	State Zip Code ID 83814-2611	1 2 3 0 2 0 0 8 Transaction ID: 16216523
FEC ID number of contributing federal political committee.	ID 83814-2611	Amount of Each Receipt this Period 26.60
Name of Employer Kootenai Medical Center Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 526.60	
Full Name (Last, First, Middle Initial) Mr. Craig A Johnson Mailing Address 6640 Kaniksu Street		Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16216524
Bonners Ferry	ID 83805-7532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	26.60
Name of Employer Boundary Community Hospit- al	Occupation Chief Executive Officer and Chief Fina	<u>a</u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 201.60	
Full Name (Last, First, Middle Initial) Mr Brian Nall		Date of Receipt
Mailing Address 229 South Seventh Str	reet	12 30 4 2008
City	State Zip Code ID 83861-1803	Transaction ID: 16216525
Saint Maries FEC ID number of contributing federal political committee.	ID 83861-1803	Amount of Each Receipt this Period 26.60
Name of Employer Benewah Community Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 201.60	
SUBTOTAL of Receipts This Page (optional)		79.80
TOTAL This Period (last page this line number	<u> </u>	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 232 (check only one) X
or for con	mation copied from such Reports and St nmercial purposes, other than using the OF COMMITTEE (In Full) rican Hospital Association PAC	tatements may name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ms. To Mailing City Boise FEC II federa Name Idaho Receip	D number of contributing I political committee. of Employer Hospital Association		Zip Code 83701-1278 n sident, Government Affairs e Year-to-Date ▼	Date of Receipt M M D D Y Y Y Y Y Y Y
B. Ms. St Mailing City Boise FEC II federa Name Idaho Receip	D number of contributing I political committee. of Employer Hospital Association	<u> </u>	Zip Code 83714-9695 n sident, Operations e Year-to-Date 201.60	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mailing City Mosc FEC II federa Name Gritma	D number of contributing I political committee. of Employer an Medical Center	State ID C Occupation Chief Exc	Zip Code 83843-3056 n ecutive Officer e Year-to-Date ▼ 526.60	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTO ⁻	FAL of Receipts This Page (optional))	79.80

City Troy State Zip Code ID 83871-9619	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 191 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Milling Address 1121 Lamb Road City State Zip Code Transaction ID: 16216532 Troy ID 83871-9619 FEG ID number of contributing federal political committee. C State Zip Code Transaction ID: 16216532 Amount of Each Receipt this Perior 26. Name of Employer Legacy Hospital Partners, Inc. PEC ID number of contributing federal political committee. C State Zip Code Transaction ID: 16216532 Amount of Each Receipt this Perior 26. Date of Receipt Transaction ID: 16216532 Amount of Each Receipt this Perior 26. Date of Receipt Transaction ID: 16216532 Amount of Each Receipt this Perior 26. Date of Receipt Transaction ID: 16216532 Amount of Each Receipt this Perior 3 Transaction ID: 16265192 Amount of Each Receipt this Perior 17. Transaction ID: 16265192 Amount of Each Receipt this Perior 17. Transaction ID: 16265192 Amount of Each Receipt this Perior 19. Transaction ID: 16265192 Amount of Each Receipt this Perior 19. Transaction ID: 16267176 Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt this Perior 19. Transaction ID: 16267776 Amount of Each Receipt th	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person to a name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
FEC ID number of contributing federal political committee. Name of Employer Gritman Medical Center Receipt For: Primary General Other (specify) ▼ City Primary General Occupation Trustee Aggregate Year-to-Date ▼ 1201.60 Date of Receipt Transaction ID: 16265192 Amount of Each Receipt this Perio Executive VP Aggregate Year-to-Date ▼ 1201.60 Date of Receipt Transaction ID: 16265192 Amount of Each Receipt this Perio Executive VP Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Steven E Brown, FACHE Mailing Address 12040 NE 128th Street City Kirkland WA 98034-3013 FEC ID number of contributing federal political committee. City Aggregate Year-to-Date ▼ Transaction ID: 16267776 Amount of Each Receipt 1200. Date of Receipt 1200. Transaction ID: 16267776 Amount of Each Receipt this Perio Transaction ID: 16267776 Amount of Each Receipt this Perio City Aggregate Year-to-Date ▼ Primary General City Aggregate Year-to-Date ▼ Primary General City Aggregate Year-to-Date ▼ 1200. Transaction ID: 16267776 Amount of Each Receipt this Perio Transaction ID: 16267776 Amount of Each Receipt this Perio City Aggregate Year-to-Date ▼ Primary General Aggregate Year-to-Date ▼ Primary General	Mr. BJ Swanson Mailing Address 1121 Lamb Road City		1 2 3 0 2 0 0 8 Transaction ID: 16216532
Receipt For:	FEC ID number of contributing federal political committee.		26.60
Date of Receipt Mailing Address 1813 Cliffview Dr City Plano TX 75093-2419 Amount of Each Receipt this Perio FEC ID number of contributing federal political committee. Name of Employer Legacy Hospital Partners, Inc. Receipt For: Primary General Other (specify) ▼ City State Zip Code TX 75093-2419 Amount of Each Receipt this Perio Cocupation Executive VP Aggregate Year-to-Date ▼ Tansaction ID: 16265192 Amount of Each Receipt this Perio Date of Receipt Tansaction ID: 16265192 Amount of Each Receipt this Perio 1000. Date of Receipt Tansaction ID: 16267776 Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio City State Zip Code WA 98034-3013 FEC ID number of contributing federal political committee. Name of Employer Evergreen Healthcare Chief Executive Officer Receipt For: Primary General Date of Receipt Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio Tansaction ID: 16267776 Amount of Each Receipt this Perio	Receipt For: Primary General	Trustee Aggregate Year-to-Date ▼ 201.60	
City State Zip Code TX 75093-2419 FEC ID number of contributing federal political committee. Name of Employer Legacy Hospital Partners, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Steven E Brown, FACHE Mailing Address 12040 NE 128th Street City State Zip Code Mirkland WA 98034-3013 FEC ID number of contributing federal political committee. Name of Employer Evergreen Healthcare Name of Employer Evergreen Healthcare Receipt For: Primary General Occupation Chief Executive Officer Aggregate Year-to-Date ▼ Transaction ID: 16265192 Amount of Each Receipt this Perio Date of Receipt Transaction ID: 16265192 Amount of Each Receipt this Perio Transaction ID: 162677776 Amount of Each Receipt this Perio Chief Executive Officer Aggregate Year-to-Date ▼	Tom Frazier		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Legacy Hospital Partners, Inc. Executive VP	City	State Zip Code	
Inc.	FEC ID number of contributing		Amount of Each Receipt this Period 1000.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Steven E Brown, , FACHE Mailing Address 12040 NE 128th Street City State Zip Code Kirkland WA 98034-3013 FEC ID number of contributing federal political committee. Name of Employer Evergreen Healthcare Receipt For: Primary General Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00 Date of Receipt Transaction ID: 16267776 Amount of Each Receipt this Perio Chief Executive Officer Aggregate Year-to-Date ▼	Inc.	Executive VP	_
Mr. Steven È Brown, , FACHE Mailing Address 12040 NE 128th Street City State Zip Code Kirkland WA 98034-3013 FEC ID number of contributing federal political committee. Name of Employer Evergreen Healthcare Receipt For: Primary General Date of Receipt M			
City State Zip Code WA 98034-3013 FEC ID number of contributing federal political committee. Name of Employer Evergreen Healthcare Receipt For: Primary General State Zip Code Transaction ID: 16267776 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Mr. Steven E Brown, , FACHE	et	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Evergreen Healthcare Receipt For: Primary General C Occupation Chief Executive Officer Aggregate Year-to-Date	•	•	Transaction ID: 16267776
Receipt For: Primary General Aggregate Year-to-Date 750.00	FEC ID number of contributing		Amount of Each Receipt this Period 250.00
Primary General	Name of Employer Evergreen Healthcare	1	
	Primary General	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)	····	1276.60

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for o	formation copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) nerican Hospital Association PAC	atements ma name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ms. Ms. Mai City See FEG fedd	attle C ID number of contributing eral political committee. me of Employer out Health Eastside Hos-		Zip Code 98121-1536 on sident, Public Affairs & Gove e Year-to-Date ▼	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16267777 Amount of Each Receipt this Period 250.00
Mr. Mai Mr. Mai See FEG fedd Nar Wa Ass	Name (Last, First, Middle Initial) Len McComb ling Address 300 Elliott Avenue Wes Suite 300 / attle C ID number of contributing eral political committee. me of Employer Ishington State Hospital Sociation Seciation Deipt For: Primary General Other (specify)	State WA C Occupatio Governm	Zip Code 98119-4198 on nent Relations Officer e Year-to-Date ▼ 400.00	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16267778 Amount of Each Receipt this Period 400.00
Mr. Mai Mai City See FEG fedo	Name (Last, First, Middle Initial) Greg Reed ling Address 2000 Hospital Drive dro Woolley C ID number of contributing eral political committee. me of Employer ted General Hospital ceipt For: Primary General Other (specify)		Zip Code 98284-4327 on ecutive Officer e Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y 1 2 3 0 2 0 0 8 Transaction ID: 16267779 Amount of Each Receipt this Period 300.00
SUBT	OTAL of Receipts This Page (optional)			950.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	nd Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Martin Siegel Mailing Address 747 Broadway Aver	nue	Date of Receipt 1 2
City Seattle	State Zip Code WA 98122-4379	Transaction ID: 16267789 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Swedish Health Services	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Clarence (Bud) Barnes Mailing Address 101 West Eighth Av	venue	Date of Receipt
		12 30 2008
City Spokane	State Zip Code WA 99204-2307	Transaction ID: 16267790
FEC ID number of contributing federal political committee.	C 99204-2307	Amount of Each Receipt this Period 325.00
Name of Employer Sacred Heart Medical Cent- er	Occupation CEO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Ryland (Skip) Davis	-	Date of Receipt
Mailing Address 101 West Eighth Av	venue	12 30 7 2008
City	State Zip Code	Transaction ID: 16267791
Spokane FEC ID number of contributing federal political committee.	WA 99204-2307	Amount of Each Receipt this Period 500.00
Name of Employer Sacred Heart Medical Cent- er	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	1	1075.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 232 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	I Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gary Kaplan Mailing Address 1100 Ninth Avenue		Date of Receipt
City Seattle	State Zip Code WA 98101-2799	Transaction ID: 16267792 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Virginia Mason Medical Center Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Mr. Joseph M Kortum Mailing Address P O Box 1600		Date of Receipt 1 2 3 0 2 0 0 8
City	State Zip Code	Transaction ID: 16267793
Vancouver	WA 98668-1600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Southwest Washington Medical Center Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	- -
Full Name (Last, First, Middle Initial) Ms. Sarah Patterson		Date of Receipt
Mailing Address 1100 Ninth Avenue		12 30 7 2008
City	State Zip Code WA 98101-2756	Transaction ID: 16267794
Seattle FEC ID number of contributing federal political committee.	WA 98101-2756	Amount of Each Receipt this Period 500.00
Name of Employer Virginia Mason Medical Ce- nter	Occupation Executive VP/Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John R White Mailing Address 801 East Wheeler Roa City Moses Lake FEC ID number of contributing federal political committee. Name of Employer Samaritan Healthcare	State Zip Code WA 98837-1820 C Occupation President and Chief Executive Office	Date of Receipt 1 2 3 0 2 0 0 8 Transaction ID: 16267795 Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 850.00	
Full Name (Last, First, Middle Initial) Mr. Alan R Yordy Mailing Address 14432 SE Eastgate W	/ay, Ste 300	Date of Receipt 1 2 3 0 7 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
City	State Zip Code	Transaction ID: 16267796
Bellevue FEC ID number of contributing federal political committee.	WA 98007-6493	Amount of Each Receipt this Period 500.00
Name of Employer PeaceHealth Receipt For: Primary General	Occupation President and Chief Executive Office Aggregate Year-to-Date	r
Other (specify) ▼	1500.00	
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Champi Krenik		Date of Receipt
Mailing Address 605 Upland Place		12 26 26 2008
City	State Zip Code	Transaction ID: 16276497
Alexandria FEC ID number of contributing federal political committee.	VA 22301-2743	Amount of Each Receipt this Period 150.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Director, Federal Legislative Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional)		1150.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 196 / 232 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest	Blvd.	Date of Receipt 1 2 2 6 2 0 0 8
City Manasquan	State Zip Code NJ 08736-4001	Transaction ID: 16276501 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Information Officer Aggregate Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Ave	nue	Date of Receipt 1 2 2 6 2 0 0 8
City	State Zip Code	Transaction ID: 16276504
Pennington FEC ID number of contributing federal political committee.	NJ 08534-2302	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation General Counsel Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper	1 1 1 1 1 1 1 1	Date of Receipt
Mailing Address 121 Clear Creek Ro	ad	1 2 2 6 2 0 0 8
City	State Zip Code	Transaction ID: 16276505
Langhorne FEC ID number of contributing federal political committee.	PA 19047-2306	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association	Occupation Vice President, Human Resources	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 245.00	
		15.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 232 (check only one) X 11a
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David P. Lavins Mailing Address 10 Fox Chase Road		Date of Receipt 1 2 2 6 2 0 0 8
City	State Zip Code	Transaction ID: 16276509
Malvern FEC ID number of contributing federal political committee.	PA 19355-3441	Amount of Each Receipt this Period 5.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Chief Financial Officer Aggregate Year-to-Date 495.00	
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain	Road	Date of Receipt 1 2 2 6 2 0 0 8
City	State Zip Code	Transaction ID: 16276512
New Hope	PA 18938-5760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 370.03	
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.		Date of Receipt
Mailing Address 4 Poppy Lane		12 26 2008
City	State Zip Code	Transaction ID: 16276522
Howell	NJ 07731-1451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation VP Health Economics	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 245.00	
		15.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 198 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane City Livingston FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General	State Zip Code NJ 07039-2750 C Occupation Vice President Continuing Care Servi Aggregate Year-to-Date ▼	Date of Receipt M M 26 2008 Transaction ID: 16276529 Amount of Each Receipt this Period 5.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Melinda Estes, , M.D. Mailing Address 111 Colchester Avenue City Burlington FEC ID number of contributing	State Zip Code VT 05401-1473	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer Fletcher Allen Health Care Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 700.00	350.00
Full Name (Last, First, Middle Initial) Ms. Katie Vaughan Mailing Address 506A East Howell Ave City	State Zip Code	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: PR1034595121839
Alexandria FEC ID number of contributing federal political committee.	VA 22301-1216	Amount of Each Receipt this Period 20.00
Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	Occupation Associate Director Aggregate Year-to-Date 500.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		375.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 199 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee t	oon for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2008
City	State Zip Code	Transaction ID: PR1045726221839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	64.00
Name of Employer American Hospital Associa-	Occupation VP & Chief Washington Counsel	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: PR1113464221839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Section Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Davon Gray	1	Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: PR1143013021839
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.49
Name of Employer American Hospital Associa- tion-Washingt	Occupation Legislative Assistant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
		106.49

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 200 / 232 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Erin O'Malley			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W		12 31 2008
	City	State	Zip Code	Transaction ID: PR1222125721839
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 38.80
	Name of Employer American Hospital Associa-	Occupation		
	tion-Washingt Receipt For:	Project M	Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. David L. Allen			Date of Receipt
	Mailing Address 325 Seventh Street, N	W		12 31 2008
	City	State	Zip Code	Transaction ID: PR1234662821839
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate	n e Director, Media Relations	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Mary Meadows			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y Y 1 1 2 0 0 8
	City	State	Zip Code	Transaction ID: PR1260472921839
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		14.00
	Name of Employer American Organization of Nurse Executi	, .	of Professional Practice	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)			66.80

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he (check only one)
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Michelle M. Mathy		Date of Receipt
	Mailing Address 1660 Lanier PL Apt. 30	9	12 31 2008
	City Washington	State Zip Code DC 20009-2938	Transaction ID: PR1300853721839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General	Occupation Project Manager/PAC Coordin Aggregate Year-to-Date	P/R Deduction (\$14.00 Bi-
	Other (specify) ▼ Full Name (Last, First, Middle Initial)		Weekly)
	Mr. Alex White, Jr. Mailing Address One North Franklin		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1339349921839
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	108.00
	Name of Employer	Occupation Former Account Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1500	P/R Deduction (\$58.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		12 31 2008
	City	State Zip Code	Transaction ID: PR1347703421839
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation VP, Operations and Account S Aggregate Year-to-Date ▼	Services
	Primary General Other (specify) ▼	500	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		142.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 232 (check only one) X 11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Date of Receipt
	Mailing Address One North Franklin		12 31 2008
	Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347703621839
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Catherine D. Sewell		Date of Receipt
	Mailing Address One North Franklin		1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347708421839
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	99.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347791021839
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Operations, AONE	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/P Doduction (\$14.00 Pi
	Other (specify)	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Г			133.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		12 31 7 2008
	City <u>Washington</u>	State Zip Code DC 20004-2802	Transaction ID: PR1384065321839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary Other (specify)	Occupation Associate Director, Federal Relations Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$39.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake		Date of Receipt
	Mailing Address One North Franklin		12 31 7 2008
	City	State Zip Code	Transaction ID: PR1492459921839
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 26.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Executive Director - ASHHF	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Linda Fishman		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W	12 31 2008
	City	State Zip Code	Transaction ID: PR327629121839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Vice President, Public Policy Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate real-to-Date 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		110.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 232 (check only one) X
, C	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
	Mailing Address 11004 Petersborough	Drive	12
	City	State Zip Code	Transaction ID: PR327745921839
	Rockville	MD 20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue	<u> </u>	Date of Receipt
	Mailing Address 122 N. Greenwood Av	enue	1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: PR327771621839
	Park Ridge	IL 60068-3227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik	<u> </u>	Date of Receipt
	Mailing Address One North Franklin		12 31 YYYYY 12 31 2008
	City	State Zip Code	Transaction ID: PR327777221839
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>	53.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 205 / 232 (check only one) X 11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenu		12 31 2008
	City Oak Park	State Zip Code IL 60304-2132	Transaction ID: PR327777821839
	FEC ID number of contributing federal political committee.	C 00304-2132	Amount of Each Receipt this Period 20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele	L	Date of Receipt
	Mailing Address 1003 Kimberly Place		12 31 YYYYY 12008
	City	State Zip Code	Transaction ID: PR327801721839
	Great Falls	VA 22066-1546	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		12 31 7 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327812021839
	FEC ID number of contributing federal political committee.	C 20004-2616	Amount of Each Receipt this Period 64.00
	Name of Employer American Organization of Nurse Executi	Occupation Executive Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ	CURTOTAL of Descripts This Descriptional		104.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 206 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16
ny information copied from such Reports and S	Statements may not be sold or used by any ename and address of any political committee.	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
Mailing Address 6034 North 22nd Stre	et	12 31 2008
City	State Zip Code	Transaction ID: PR327831721839
Arlington	VA 22205-3408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan	<u>I</u>	Date of Receipt
Mailing Address One North Franklin St	reet	12 31 2008
City	State Zip Code	Transaction ID: PR327846221839
Chicago	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Meetings & Trave	el Serv
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga		Date of Receipt
Mailing Address 2401 Calvert Street, N Apt. 1008	W	12 31 7 2008
City	State Zip Code	Transaction ID: PR327851921839
Washington	DC 20008-2614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy Development	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
CURTOTAL of Pagainta This Paga (antional)		54.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207 / 232 (check only one) X
,	r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 7 2008
	City	State Zip Code DC 20004-2818	Transaction ID: PR327858021839
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 64.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Political Affairs	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
- i.	Full Name (Last, First, Middle Initial) Mr. John F. Barry		Date of Receipt
	Mailing Address One North Franklin		12 31 2008
	City	State Zip Code	Transaction ID: PR327877821839
	Millis	MA 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom		Date of Receipt
	Mailing Address 130 North Garland Co #3002	urt	12 31 2008
	City	State Zip Code	Transaction ID: PR327895721839
	Chicago	IL 60602-4750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
	CURTOTAL of Descipto This Dage (entires)		148.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 232 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Ms. Judy Williams			Date of Receipt
	Mailing Address One North Franklin Str			12 31 2008
	City Chicago	State IL	Zip Code 60606	Transaction ID: PR327918921839
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 27.00
	Name of Employer American Hospital Associa- tion-Chicago	-	Membership	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			12 31 2008
	City Washington	State DC	Zip Code	Transaction ID: PR328132821839
	FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 64.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President	and Chief Executive Office	ır
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach			Date of Receipt
	Mailing Address 204 7th Ave			12 31 2008
	City	State	Zip Code	Transaction ID: PR328136921839
	La Grange FEC ID number of contributing federal political committee.	C	60525-6406	Amount of Each Receipt this Period 64.00
	Name of Employer American Hospital Associa- tion-Chicago	, '	President, Member Relation	s
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			155.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 232 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any per ename and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Ľ	Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
	Mailing Address One North Franklin St	reet	12 31 2008
	City Chicago	State Zip Code IL 60606	Transaction ID: PR328174921839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Executive Director, SHSMD Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		12 31 2008
	City	State Zip Code	Transaction ID: PR328223821839
	Chicago FEC ID number of contributing federal political committee.	IL 60640-1318	Amount of Each Receipt this Period 64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.		Date of Receipt
	Mailing Address 13106 Vingle Lane		1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: PR328224921839
	Silver Spring	MD 20906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1	154.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 210 / 232 (check only one) X 11a
any information copied from such Reports and S	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
Mailing Address 1093 N. Faldo Way		12 31 7 2008
City	State Zip Code	Transaction ID: PR328241421839
Eagle	ID 83616-5369	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	582.50	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack		Date of Receipt
Mailing Address 3475 North Venice Str	eet	1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: PR328260921839
Arlington	VA 22207-4446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	64.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard H. Wade		Date of Receipt
Mailing Address 1221 Cavalier Road		12 31 2008
City	State Zip Code	Transaction ID: PR328310421839
Arnold	MD 21012-2126	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Vice President, Communications	
Receipt For:	Aggregate Year-to-Date ▼	_1
Primary ☐ General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
CURTOTAL of Receipts This Page (optional)		124.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 211 / 232 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the name and add	uress or arry political committee to	Solicit contributions from Such committee.
(
American Hospital Association PAC	,		
Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
Mailing Address 325 Seventh Street, Suite 700	NW		1 2 3 1 2 0 0 8
City	State	Zip Code	Transaction ID: PR328341821839
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		64.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For:	 	n Political Action & Grassroot Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
Mailing Address 325 Seventh Street, Suite 700	NW		12 31 2008
City	State	Zip Code	Transaction ID: PR328490121839
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.12
Name of Employer American Hospital Associa- tion-Washingt	Occupatio Senior A	n ssociate Director	7
Receipt For:	- ' '	e Year-to-Date ▼	
Primary General Other (specify) ▼	33, 53	350.00	P/R Deduction (\$10.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
Mailing Address 200 Clover Hill Cour	rt		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: PR328511821839
Yardley	PA	19067-5736	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		64.00
Name of Employer American Hospital Associa- tion-Chicago	, '	Executive	
Receipt For:	Aggregate	e Year-to-Date ▼	_
Primary General Other (specify) ▼	0 0	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
			147.12

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any persor e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell		Date of Receipt
	Mailing Address 1501 N. Harrison Stre		12 31 2008
	City Arlington	State Zip Code VA 22205-2726	Transaction ID: PR328512021839
	FEC ID number of contributing federal political committee.	C 22203-2720	Amount of Each Receipt this Period 20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Media Relations	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey	<u> </u>	Date of Receipt
	Mailing Address One North Franklin St	reet	1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR329013421839
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address 1 North Franklin SAtre	eet	12 31 2008
	City	State Zip Code	Transaction ID: PR329071321839
	Chicago	IL 60614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & Chief Operating Officer, C	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$39.00 Bi-
	Other (specify)	1000.00	Weekly)
	SUPTOTAL of Possints This Page (entired)		104.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		12 31 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR329084421839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	1 2 3 1 2 0 0 8	
	City	State Zip Code	Transaction ID: PR329215721839
	Nashville FEC ID number of contributing	TN 37210-4634	Amount of Each Receipt this Period
	federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
	Mailing Address One North Franklin Str	reet	12 31 2008
	City	State Zip Code	Transaction ID: PR329342621839
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President & CFO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
Г	SUBTOTAL of Receipts This Page (optional)	1	98.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 232 (check only one) X
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris		Date of Receipt
Mailing Address 1136 W. Farwell Ave.		12 / 31 / 2008
City Chicago	State Zip Code IL 60626-3861	Transaction ID: PR329654221839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	14.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASDVS	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
Mailing Address One North Franklin		1 2 3 1 2 0 0 8
City	State Zip Code	Transaction ID: PR330343321839
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Services Director	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
Mailing Address One North Franklin		12 31 2008
City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330411621839
FEC ID number of contributing federal political committee.	C 00000-3430	Amount of Each Receipt this Period 20.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		54.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 215 / 232 (check only one) X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		12 31 7 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR330465221839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 2000+2010	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Asst. General Counsel	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
	Mailing Address 4960 138th Cricle Wes	t	1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330475421839
	Apple Valley	MN 55124	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard		Date of Receipt
	Mailing Address 6109 North 9th Road		12 31 2008
	City	State Zip Code	Transaction ID: PR330534321839
	Arlington	VA 22205-1609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi-Weekly)
	SUBTOTAL of Receipts This Page (optional)	<u> </u>	112.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedu for each category of Detailed Summary P	the (crieck only only)
A 0	ny information copied from such Reports and s r for commercial purposes, other than using the	statements may not be sold or used by a name and address of any political con	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
	Mailing Address One North Franklin		12 31 2008
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330547721839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Vice President, Strategic Plan Aggregate Year-to-Date	nning
	Primary General Other (specify) ▼	500	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
	Mailing Address 172 Atteridge		1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: PR330549221839
	Lake Forest	IL 60045-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Rela	tions
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330776121839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation V.P., Advocacy & Member Co	ommunications
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi- Weekly)
		I	60.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 217 / 232 (check only one) X
or fo	information copied from such Reports and St r commercial purposes, other than using the IAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
. <u>N</u>	ull Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.			Date of Receipt
_	Mailing Address 1101 N. Kentucky Stree			12 31 2008
	Sity Arlington	State VA	Zip Code 22205-3515	Transaction ID: PR331278821839 Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	С		14.00
N A ti	lame of Employer umerican Hospital Associa- on-Washingt	Occupatio Director,	n State Issues Forum	
F	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	ull Name (Last, First, Middle Initial) Is. Darlene S. Vanderbush			Date of Receipt
N	failing Address 26 West Glendale Ave.			12 31 2008
	ity	State	Zip Code	Transaction ID: PR331304221839
F	Alexandria EC ID number of contributing ederal political committee.	C	22301-2402	Amount of Each Receipt this Period 20.00
<u>ti</u>	lame of Employer umerican Hospital Associa- on-Washingt	. '	Advocacy and Public Policy	Ор
F	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
	ull Name (Last, First, Middle Initial) As. Jo Ann Webb			Date of Receipt
N	Mailing Address 325 Seventh Street, NV Suite 700	N		1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331379121839
F	Vashington EC ID number of contributing ederal political committee.	C	20004-2818	Amount of Each Receipt this Period 14.00
N A ti	lame of Employer umerican Hospital Associa- on-Washingt	Occupatio Sr. Direc	n tor Federal Relations & Polic	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
SUI	BTOTAL of Receipts This Page (optional)			48.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 218 / 232 (check only one) X
A OI	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		12 31 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR331386921839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.68
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.		Date of Receipt
	Mailing Address PO Box 15587		1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: PR331416021839
	Austin FEC ID number of contributing	TX 78761-5587	Amount of Each Receipt this Period
	federal political committee.	C	108.00
	Name of Employer American Hospital Associa- tion	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	1500.00	P/R Deduction (\$58.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		12 31 2008
	City	State Zip Code	Transaction ID: PR331533221839
	Falls Church	VA 22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		200.68

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
	Mailing Address One North Franklin		1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: PR346168121839
	Chicago EEC ID number of contributing	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	14.00
	Name of Employer American Hospital Associa-	Occupation Vice President, PMG	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$19.92 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	IW	12 31 2008
	City	State Zip Code	Transaction ID: PR517619721839
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	64.00
	Name of Employer American Hospital Associa-	Occupation Vice President Executive Branch Relat	
	tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson	I	Date of Receipt
	Mailing Address 325 Seventh Street, N	W	1 2 3 1 2 0 0 8
	City	State Zip Code	Transaction ID: PR566280921839
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	47.61
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Г	SURTOTAL of Receipts This Page (entional)	>	125.61

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 232 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
Mailing Address 606 S. Royal St.		12 7 31 7 2008
City Alexandria	State Zip Code VA 22314-4142	Transaction ID: PR766023721839 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director, Policy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	12 31 7 2008
City	State Zip Code	Transaction ID: PR801366321839
Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 14.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director Policy	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	12 31 2008
City Washington	State Zip Code DC 20004-2818	Transaction ID: PR876637221839
FEC ID number of contributing federal political committee.	C 20004-2616	Amount of Each Receipt this Period 14.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Legislative Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		48.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and State or for commercial purposes, other than using the received the succession of the	atements ma name and adi	for each cate Detailed Sur	nmary Page used by any perso	FOR LINE NUMBER: PAGE 221 / 232 (check only one) X 11a 11b 11c 12 13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Α.	Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows Mailing Address 325 Seventh Street, NW Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt Receipt For: Primary General	State Zip Code DC 20004-2818 C Occupation Director of Operations Aggregate Year-to-Date			Date of Receipt M M
Б.	Other (specify) Full Name (Last, First, Middle Initial) Mr. David A. Strickland Mailing Address One N. Franklin Street City Chicago	State	Zip Code 60606	350.00	Date of Receipt 1 2 3 1 2 0 0 8 Transaction ID: PR939603921839 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer American Organization of Nurse Executi Receipt For: Primary General Other (specify)	Occupation Director		_	P/R Deduction (\$14.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	•	28.00
TOTAL This Period (last page this line number only)	•	194406.16

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 232 (check only one) 11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persele name and address of any political committee t	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal		Date of Receipt
Mailing Address P.O. Box 15587		12 09 2008
City <u>Austin</u>	State Zip Code TX 78761-5587	Transaction ID: 16162639 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00301325	14000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 77000.00	
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal		Date of Receipt
Mailing Address Post Office Box 8600		12 08 7 2008
City	State Zip Code	Transaction ID: 16173021
Harrisburg FEC ID number of contributing federal political committee.	PA 17105-8600 C C00128082	Amount of Each Receipt this Period 6500.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 86500.00	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federa	<u> </u>	Date of Receipt
Mailing Address 1215 K Street Suite 800		12 19 2008
City Sacramento	State Zip Code CA 95814	Transaction ID: 16179238 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00237495	10000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 115000.00	
SUBTOTAL of Receipts This Page (optional)	-	30500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 232 (check only one) 11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Health Alliance of PA PAC - Federal Mailing Address Post Office Box 8600	Ohata Zin Oada	Date of Receipt 1 2 2 3 2 0 0 8
City Harrisburg	State Zip Code PA 17105-8600	Transaction ID: 16196088
FEC ID number of contributing federal political committee.	C C00128082	Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 89000.00	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal Mailing Address 1215 K Street		Date of Receipt
Suite 800	Otata 7in Ocale	12 29 2008
City Sacramento	State Zip Code CA 95814	Transaction ID: 16196100 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00237495	10000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 125000.00	
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal	•	Date of Receipt
Mailing Address P.O. Box 15587		M M / D D / Y Y Y Y Y 1 Y 1 2 0 0 8
City	State Zip Code	Transaction ID: 16198491
Austin	TX 78761-5587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00301325	9000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 86000.00	
SURTOTAL of Receipts This Page (optional)	·	21500.00

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 224 / 232										
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)									
			Detailed Summary Page		11a 13		11b 14		11c 15	$\stackrel{\wedge}{\Box}$	12 16		17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for th	ne purp contrib	ose	of soli	icitir n su	ng con uch co	tribu mmi	itions ittee.		
$\overline{\ }$	NAME OF COMMITTEE (In Full)												
\rangle	American Hospital Association PAC												
	Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC				Date of	Re	ceipt						
	Mailing Address 5510 Research Park Driv	ve			м м 12	′	3	D /	Y		0 0 8		
	City	State	Zip Code	Ti	ransa	ctio	n ID: 1	162	1635	9			
	Madison	WI	53725-9038		Amoun	t of	Each F	Rece	eipt thi	s Pe	eriod		
	FEC ID number of contributing federal political committee.	C C00	0359455							145	50.00		
	Name of Employer	Occupation	n										
	Receipt For:	Aggregate	e Year-to-Date ▼										
	Primary General Other (specify) ▼		11450.00										

SUBTOTAL of Receipts This Page (optional)	•	1450.00
TOTAL This Period (last page this line number only)	•	53450.00

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 225 / 232									
	EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b X 11c 12 13 14 15 16 17									
	ny information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad											
$\overline{\ }$	NAME OF COMMITTEE (In Full)											
\rangle	American Hospital Association PAC											
	Full Name (Last, First, Middle Initial) HCA Good Government Fund-Federal PAC		Date of Receipt									
	Mailing Address On Park Plaza PO Box 550		12 23 7 2008									
	City State	Zip Code	Transaction ID: 16193350									
	Nashville TN	37202-0550	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	0067231	5000.00									
	Name of Employer Occupation	on										
	Receipt For: Primary General Other (specify)	e Year-to-Date ▼ 5000.00										

SUBTOTAL of Receipts This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	5000.00

	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	Use separate schedule(s) for each category of the Detailed Summary Page by not be sold or used by any peddress of any political committee	FOR LINE NUMBER: PAGE 226 / 232 (check only one) 11a 11b 11c 12 13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW			Date of Receipt
	City Washington	State DC	Zip Code 20005	Transaction ID: 16266799 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		393.70
	Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	e Year-to-Date ▼ 5473.03	Interest
В.	Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 16275859
	Washington	DC	20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		336.17
	Name of Employer	Occupatio	on	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5079.33	Interest

SUBTOTAL of Receipts This Page (optional)		729.87
SOBTOTAL OF Receipts Trils Page (optional)		
TOTAL This Period (last page this line number only)	•	729.87

В.

C.

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Use sepa			-	INE NUMBER: PAGE 227 / 232 only one)									2			
		for each category of the Detailed Summary Page				21b		22 X 23 24 2						25		26		
Any Information copied from such F											olicitin				s	30b		
or for commercial purposes, other the		e and addres	ss of any politica	l com	nr	nittee to s	olic	it contr	ibuti	ions fro	om su	ch c	omn	nittee				
NAME OF COMMITTEE (In Fu American Hospital Associa	*																	
Full Name (Last, First, Middle Ir	nitial)							Trans	acti	on ID:	161	64	101					
Green Mountain PAC	,						Transaction ID: 16164101 Date of Disbursement 12 0 9 7 2 0 8											
Mailing Address PO Box 1	142																	
City Montpelier		State VT	Zip Code 05601					Amou	nt o	f Each	Disbu	rser	men	t this	Perio	od		
Purpose of Disbursement 2008 Contribution					0	11		L.	-				25	00.0	0			
Candidate Name Green Mountain PAC				Ca	at	egory/ ype												
Office Sought: House Senate Presider State: District:		ement For: Primary Other (spe	General cify) ▼				2008 Contribution											
Full Name (Last, First, Middle Ir	itial)							Trans	acti	on ID:	161	64	197					
Mikulski For Senate Comm						Transaction ID: 16164127 Date of Disbursement												
Mailing Address POB13	147							12 D D D V Y 2008										
City Baltimore		State MD	Zip Code 21203					Amou	nt o	f Each	Disbu	rser	men	t this	Perio	od		
Purpose of Disbursement Contribution					0	11	1000.00											
Candidate Name Sen. Barbara A. Mikulski					Category/ Type													
Office Sought: House X Senate Presider State: MD District:	Х	ement For: Primary Other (spe	2010 General cify)					Contri	ibut	ion								
Full Name (Last, First, Middle Ir	 .itial)							Trans		an ID:	161	64	120					
Cummings For Congress C		mittee					Transaction ID: 16164139 Date of Disbursement											
Mailing Address PO Box 1	631							1 2	М .	0	9 /	Ľ	2	0 ŏ 8	3			
City Baltimore		State MD	Zip Code 21203					Amou	nt o	f Each	Disbu	rser		-		od		
Purpose of Disbursement Contribution									-				10	0.00	0			
Candidate Name Rep. Elijah E. Cummings	Candidate Name Rep. Elijah E. Cummings Category/ Type																	
Office Sought: X House Senate Presider	Х	ement For: Primary Other (spe	2010 General					Contri	ibut	ion								
State: MD District: 07			· · ·															
SUBTOTAL of Disbursements Th	is Page (optional)					•							45	0.00	0			

TOTAL This Period (last page this line number only)

SCHEDIII E B (FEC Form 3Y)

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Pete Sessions For Congress			Transaction ID: 16165872 Date of Disbursement
Mailing Address PO Box 823047			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City Dallas	State Zip Code TX 75382		Amount of Each Disbursement this Period
Purpose of Disbursement Void of 10/08 check		011	-1000.00
Candidate Name Rep. Pete Sessions		Category/ Type	
Office Sought: X House Senate President State: TX District: 32	sement For: 2008 Primary X General Other (specify) ▼		Void of 10/08 check
Full Name (Last, First, Middle Initial)			Transaction ID: 16165877
Charles A. Gonzalez Congressional Can	npaign		Date of Disbursement
Mailing Address PO Box 12612			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
City San Antonio	State Zip Code TX 78212		Amount of Each Disbursement this Period
Purpose of Disbursement Void of 10/08 check		011	-2000.00
Candidate Name Rep. Charles A. Gonzalez		Category/ Type	
Office Sought: X House Disbute Senate President State: TX District: 20	sement For: 2008 Primary X General Other (specify)		Void of 10/08 check
Full Name (Last, First, Middle Initial) Al Green For Congress			Transaction ID: 16176348 Date of Disbursement
Mailing Address P.O. Box 20174 Suite 321			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} $
City Houston	State Zip Code TX 77225		Amount of Each Disbursement this Period
Purpose of Disbursement Void of 10/08 check		011	-1000.00
Candidate Name Rep. Al Green		Category/ Type	
Senate President	sement For: 2008 Primary X General Other (specify)		Void of 10/08 check
	n		-4000.00
SUBTOTAL of Disbursements This Page (optional	I)	<u> </u>	

SCHEDULE B (FEC Form 3X)	Use sepa				NE NUMBER: PAGE 229 only one)							232	
ITEMIZED DISBURSEMENTS		ategory of the Summary Page			21b 27	22 28a	Х	23 28b	F	24 28c		25 29	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam													
NAME OF COMMITTEE (In Full)		or any pointour	0011			2011	iibat	10110 1			001111	milloo	
American Hospital Association PAC													
Full Name (Last, First, Middle Initial) Gene Green Congressional Campaign				ion IE		16176 nent	353	}					
Mailing Address PO Box 16128						1 ^M 2	М	/ D	1 () /	Ž	0 Ď 8	Y
City Houston	State TX	Zip Code 77222				Amo	unt o	f Eac	h D	isburse			
Purpose of Disbursement Void of 10/08 check			Г	01	1	L.					-10	00.00)
Candidate Name Rep. Gene Green				ateg Typ	ory/								
Senate President	ement For: Primary Other (spec	2008 X General cify) V				Void	of 1	0/08	ch	ieck			
State: TX District: 29 Full Name (Last, First, Middle Initial)						Tues		IF		10100	105		
Bright For Congress.Com							of D	isburs	sen				ν.
Mailing Address P.O.Box 2106	Mailing Address P.O.Box 2106								1 6	S ' L	ž	0 Ď 8	Y
City Montgomery	State AL	Zip Code 36102				Amo	unt o	f Eac	h D	isburse	emen	t this F	Perio
Purpose of Disbursement Contribution			Г	01	1	L.					10	00.00)
Candidate Name Rep. Bobby Neal Bright, Sr.				ateg Typ	ory/								
Senate President X	ement For: Primary Other (spec					Cont	ribut	tion					
State: AL District: 02 2008 C	General Deb	ot Re				Tron	no oti	ion IF	٠.	16198	2400	<u> </u>	
Griffith For Congress						Date	of D	isburs	sen	nent			Υ
Mailing Address PO Box 2916			1 ^M 2		L	16	6	2	0 Ď 8				
City Huntsville	State AL	Zip Code 35804				Amo	unt o	f Eac	h D	isburse			
Purpose of Disbursement Contribution					1	1000.00)		
Candidate Name Rep. Parker Griffith, MD													
Senate President X	ement For: Primary Other (spec			Тур		Cont	ribut	tion					
State: AL District: 05 2008 0	General Deb	ot Re											
SUBTOTAL of Disbursements This Page (optional)											10	00.00)
TOTAL This Period (last page this line number only	·)				•						15	00.00)

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER:	PAGE 230 / 232
`	Use separate schedule(s)	(check only one)	1 AGE 230 / 232
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 27 28a	23 24 25 26 28b 28c X 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the na	,	, , , , , , , , , , , , , , , , , , , ,	S .
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)		Transacti	on ID: 16165423
Coleman for Senate Recount Fund			sbursement
Mailing Address 1412 Energy Park Drive	e #11	12	$\begin{bmatrix} \begin{smallmatrix} 0 \\ 0 \end{smallmatrix} \begin{bmatrix} 2 \\ \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} 1 \\ & 2 \end{smallmatrix} \begin{bmatrix} 0 \end{smallmatrix} \begin{bmatrix} 0 \\ & 2 \end{smallmatrix} \begin{bmatrix} 0 \\ & 4 \end{bmatrix} \begin{bmatrix} 0 \\ & 4 $
City Saint Paul	State Zip Code MN 55108	Amount of	Each Disbursement this Period
Purpose of Disbursement Donation		011	5000.00
Candidate Name		ategory/ Type	
Senate President	sement For: Primary General Other (specify) ▼	Donation	
State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	5000.00

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	1		E NUMBER: PAGE 231						
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 <u>`</u>	k only 1b 7	22 28a	23 28b	24 28c	24 25 28c 29		26 30	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)	and address of any pointear	Committee	10 3011	on contino	utions n	OIII SUCII	COITIII	iiittee		
American Hospital Association PAC										
Full Name (Last, First, Middle Initial) American Express				Transac Date of		: 1626 ement	6788			
Mailing Address Ste. 001				1 ^M 2 ^M	/ D	2 /	Ý Ž	0 0 8	Υ	
,	State Zip Code IL 60679			Amount	of Each	Disburs	emen		-	
Purpose of Disbursement Merchant Fees		001						4.50		
Candidate Name		Category Type	//							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼			Mercha	nt Fee	S				
Full Name (Last, First, Middle Initial) American Express				Transac Date of		: 1626	6791			
Mailing Address Ste. 001				1 ^M 2 ^M	/ D	05 /	Y Ž	0 0 8	Y	
,	State Zip Code IL 60679			Amount	of Each	Disburs	emen	t this P	eriod	
Purpose of Disbursement Merchant Fees		001					0	36.89		
Candidate Name		Category Type	//							
Office Sought: House Senate President State: District:	ment For: Primary General Other (specify) ▼			Mercha	nt Fee	S				
Full Name (Last, First, Middle Initial) Merchant Bankcard				Transac Date of		: 1626 ement	6794			
Mailing Address 1601 Elm Street				1 ^M 2 ^M	/ D) 3 [/]	Ý Ž	0 0 8	Y	
	State Zip Code TX 75201			Amount	of Each	n Disburs	emen	t this P	eriod	
Purpose of Disbursement Merchant Fees		001					. 1	53.77		
Candidate Name		Category Type	//							
Office Sought: Senate President State: Disburse	ment For: Primary General Other (specify)			Mercha	nt Fee	S				
SUBTOTAL of Disbursements This Page (optional) .			•				19	95.16		
TOTAL This Period (last page this line number only)			<u>·</u>							

В.

Office Sought:

State:

House

Senate

District:

President

Disbursement For:

Primary

Other (specify)

SCHEDULE B (FEC Form 3X)

FOR LINE NUMBER: PAGE 232 / 232 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Transaction ID: 16266795 Merchant Bankcard Date of Disbursement 0 4 2008 Mailing Address 1601 Elm Street City State Zip Code Amount of Each Disbursement this Period Dallas TX 75201 101.81 Purpose of Disbursement Merchant Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Merchant Fees General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 16266796 Citibank, F.S.B. Date of Disbursement 18 2008 Mailing Address 1400 G Street, NW City State Zip Code Amount of Each Disbursement this Period 20005 Washington DC 108.31 Purpose of Disbursement Bank Fee 001 Candidate Name Category/ Type

General

SUBTOTAL of Disbursements This Page (optional)	•	210.12
TOTAL This Period (last page this line number only)	<u> </u>	405.28

Bank Fee